Department of Health and Human Services (HHS)

Substance Abuse and Mental Health Services Administration (SAMHSA)

Drug-Free Communities (DFC) Support Program – Competing Continuation

(Use this template if you have previously received DFC funding)

(Initial Announcement)

Funding Opportunity Announcement (FOA) No. SP-17-002

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

Key Dates:

Application Deadline	**Applications are due by March 15, 2017**
Intergovernmental Review (E.O. 12372)	**Applicants must comply with E.O. 12372 if their state(s) participates. Review process recommendations from the State Single Point of Contact (SPOC) are due no later than 60 days after application deadline.**
Public Health System Impact Statement (PHSIS)/Single State Agency Coordination	**Applicants must send the PHSIS to appropriate state and local health agencies by application deadline. Comments from Single State Agency are due no later than 60 days after application deadline.**

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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) 2017 Drug-Free Communities (DFC) Support Program grants. The purpose of the DFC Support Program is to establish and strengthen collaboration to support the efforts of community coalitions working to prevent youth substance use.

Funding Opportunity Title:	Drug-Free Communities (DFC) Support Program
Funding Opportunity Number:	SP-17-002
Due Date for Applications:	March 15, 2017
Anticipated Total Available Funding:	$8,750,000
Estimated Number of Awards:	Approximately 70 grant awards
Estimated Award Amount:	Up to $125,000 per year
Cost Sharing/Match Required	Cash or In-Kind match is required See Section III - 2 of this FOA for cost sharing/match requirements.
Length of Project Period:	Up to 5 years
Eligible Applicants:	Eligible applicants are community-based coalitions addressing youth substance use that have previously received a DFC grant but experienced a lapse in funding or have concluded the first five-year funding cycle and are applying for a second five-year funding cycle. Applicants **must** meet all Statutory Eligibility Requirements. See Section III-1 of this FOA for complete eligibility information.

I. FUNDING OPPORTUNITY DESCRIPTION

1. PURPOSE

The Executive Office of the President, Office of National Drug Control Policy (ONDCP), and the Department of Health and Human Services (HHS), Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP) are accepting applications for Fiscal Year (FY) 2017 Drug-Free Communities (DFC) Support Program grants. By statute, the DFC Support Program has two goals:

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

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

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

Failure to use the correct FOA will result in an application being screened out and not proceeding to peer review.

2. EXPECTATIONS

Grants awarded through the DFC Support Program are intended to support established community-based youth substance use prevention coalitions capable of effecting community-level change. For the purposes of this FOA and the DFC Support Program, a coalition is defined as a community-based formal arrangement for cooperation and collaboration among groups or sectors of a community in which each group retains its identity, but all agree to work together toward a common goal of building a safe, healthy, and drug-free community. DFC grant award recipients, also referred to as 'recipients', are expected to conduct the day-to-day operations of the grant program. DFC recipients are not permitted to serve as a conduit for DFC funds passing through them or to another agency.

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

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

- After-school programs
- Youth mentoring programs
- Sports programs
- Treatment services/programs/facilities
- Drug courts
- Construction
- Park lighting
- Landscaping/neighborhood revitalization projects

SAMHSA strongly encourages all recipients 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 March 15, 2017.** Due to the new registration and application requirements, it is strongly recommended that applicants start the registration process **six (6) weeks in advance** of 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 apply for a waiver of the electronic submission. The waiver **must** be submitted at least 15 days prior to the application receipt date. 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.

The wavier is only considered for applicants with persistent lack of access to the internet. No other exceptions will be made.

2.1 Strategic Prevention Framework

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

1. Assessment: Identify local youth substance use problems and the community conditions that contribute to the specific identified issues.
2. Capacity: Mobilize/build capacity to change the conditions and address the youth substance use problems.

3. Planning: Develop a logic model, comprehensive 12-month Action Plan, and multi-year Strategic Plan.
4. Implementation: Implement action and strategic plans with multiple objectives, strategies, and activities.
5. Evaluation: Monitor, sustain, improve, or replace prevention activities, efforts, and strategies.

For more information on the SPF, visit www.samhsa.gov/capt/applying-strategic-prevention-framework.

2.2 Community Definition

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

The DFC Support Program **does not** make funding decisions based on geographic boundaries (e.g., number of grants within states/towns/cities). Applicants should consider that adjacent neighborhoods/towns/cities with DFC-funded community coalitions operating in different areas are encouraged. However, multiple DFC recipients may not serve the same zip code(s) unless there is written evidence of cooperation between the overlapping coalitions. See **Section III-1, Table 1, Requirement 9** of this FOA for information on written evidence of cooperation.

2.3 Community Level Change

Applicants are expected to choose strategies that will lead to community level change. Such 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. 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 DFC Support Program requires that coalitions develop and implement a comprehensive 12-Month Action Plan to prevent youth substance use. **A comprehensive 12-Month Action Plan will include an appropriate mixture of all seven strategies listed below.** Applicants are not required to name the seven strategies, identified below, in their 12-Month Action Plan but should use them as a framework for ensuring a comprehensive plan.

The Seven Strategies for Community Level Change, a conceptual understanding of strategies a coalition may employ, include efforts that affect individuals as well as an entire community.

Seven Strategies for Community Level Change

1. **Provide Information**: Educational presentations, workshops or seminars, and data or media presentations (e.g., Public Service Announcements (PSAs), brochures, town halls, forums, web communications).
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 for participation 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:** Increasing or decreasing the probability of a behavior (incentives/disincentives) 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**: As per both HHS/SAMHSA and ONDCP guidelines, 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, visit http://www.cadca.org/resources/coalition-impact-environmental-prevention-strategies.

NOTE: Applications funded by the DFC Program are **required** to comply with the following Term and Condition regarding DFC recipient restrictions on lobbying:

(c) Title 18 > Part I > Chapter 93 > Section 1913 – Lobbying with Appropriated Moneys

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

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

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

Applicants are not required at the time of application to be in compliance with the DFC National Cross-Site Evaluation Requirements however applicants **must** provide information about their ability to comply with the DFC National Cross-Site Evaluation Requirements once awarded a DFC grant **-** refer to Appendix M for more information**.**

If a successful Year One DFC applicant did **not** have the core measures **at the time of** application and/or award of the grant, the coalition will be required to submit a data collection plan to their Government Project Officer (GPO) outlining specifically how the coalition will comply with the data reporting requirements. The data collection plan is due **no later than 60 days** after the start of the grant award. Also, the coalition will have two years from the time of award to report its first complete set of core measure data.

If awarded a grant, it is the responsibility of the coalition to know the National Cross-Site Evaluation reporting schedule. An inability to supply the previously mentioned core measures in the specific increment (every 2 years) for the substances named from the grades required means a coalition is out of compliance with the grant's Terms and Conditions. **Failure to comply with the Terms and Conditions of the DFC grant award may result in suspension or termination of the award.**

2.5 DFC New Grant Award Recipient Training Requirement

New Grant Award Recipients **must** send no more than two representatives to this training. Recipients are required to send the Program Director or the Project Coordinator, and the Grant Award Recipient (fiscal agent) to a three-day DFC New Grant Award Recipient Training: one **must** be the person charged with daily programmatic oversight of the coalition, the other **must** be the person charged with financial oversight responsibilities for the DFC grant award. The training will be held in Washington, DC in the first year of the grant award. The DFC New Grant Award Recipient Training 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 management. Costs associated with the NCA are generally limited to travel (e.g., flight, car rental, per diem). Lodging, dependent upon location, may be provided. There are several locations across the United States where the NCA is held.

All new grant award recipients **must** send two people to the NCA. Specifically, key personnel in charge of the coalition's daily operations (Program Director or Project Coordinator) **must** attend all three weeks of the NCA and graduate. The second mandatory person to attend can vary each week; for example, a coalition may choose to send a coalition staff member or a community member to the NCA if awarded the DFC grant.

It is highly recommended that you contact the National Coalition Institute immediately after being awarded the DFC grant to register for the NCA location of your choice. More information on the NCA can be found at http://www.cadca.org/nca.

3. Pre-Application Workshops

All applicants applying to the DFC Program are encouraged to attend one of the following pre-application workshops. To register for a workshop listed below, go to: https://www.cmpinc.net/dfc.

- Wednesday, January 18, 2017 — Flagstaff, AZ
- Tuesday, January 24, 2017 — Birmingham, AL
- Thursday, January 26, 2017 — Dallas, TX
- Friday, February 10, 2017 — National Harbor, MD

These workshops **are not** mandatory in order to apply for this grant. The workshops provide technical assistance to help applicants complete the application. Please read this FOA in advance so you are prepared to ask questions related to the completion of an application.

If an applicant is unable to travel to a workshop, a recorded version will be posted to the DFC website by mid January 2017. The workshop registration link and the link for the online videos can be found at https://www.whitehouse.gov/ondcp/Drug-Free-Communities-Support-Program.

II. AWARD INFORMATION

Proposed budgets must not exceed $125,000 in total costs (direct and indirect) in any year of the proposed project. Annual continuation awards will depend on the availability of funds, recipient progress in meeting project goals and objectives, timely submission of the required data and reports, and compliance with all grant award Terms and Conditions. Failure to comply with the Terms and Conditions of the award may result in suspension or termination of the award.

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

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

1. A coalition that is ending or has concluded the first five-year funding cycle and is applying for a second five-year funding cycle (Year 6); or
2. Coalitions that have previously received DFC funding, but experienced a lapse in their five-year funding cycle, may apply for funding to complete their five-year cycle.

Recipients will be awarded funds for one year beginning on September 29, 2017. Funds for subsequent years within a grant cycle are distributed on an annual basis as non-competing continuation awards. Each year, recipients **must** demonstrate compliance with the DFC Statutory Eligibility Requirements.

III. ELIGIBILITY INFORMATION

1. ELIGIBLE APPLICANTS

Eligibility applicants are community-based coalitions addressing youth substance use that have previously received a DFC grant but experienced a lapse in funding or have concluded the first five-year funding cycle and are applying for a second five-year funding cycle. **Statutory Eligibility Requirements, written into the DFC Act, are inherent in the language of the DFC Support Program.** Applicants should refer to **Table 1: Statutory Eligibility Requirements,** which contains a summary of the minimum documentation applicants **must** provide to meet these criteria. The table also specifies evidence required and where to place it in the application (e.g., as an attachment, in the Project Narrative, or in the Budget Narrative).

Failure to meet any single statutory eligibility requirement will cause the application to be deemed ineligible; in such case it 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. **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.

NOTE: Coalitions that have already received 10 years of DFC funding are not eligible to apply for this grant.

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

A DFC legal applicant (an organization applying on behalf of a coalition, the coalition, or the applicant coalition) **must** reside within the United States and/or the U.S. Territories. The intent of the DFC Support Program is to fund coalition activities in the United States and does not authorize the funding of organizations or activities outside the United States.

Table 1: Statutory Eligibility Requirements

Eligibility Requirement Item:	**Evidence Required and Where to Document:**
Requirement 1: 12 Sectors	**Evidence Required:**
The coalition **must** consist of one or more representatives from each of the following required 12 sectors: • Youth (18 or younger) • Parent • Business • Media • School • Youth-serving organization • Law enforcement • Religious/Fraternal organization • Civic/Volunteer groups (i.e., local organizations committed to volunteering, not a coalition member designated as a "volunteer") • Healthcare professional or organization (i.e., primary care, hospitals, etc.) • State, local, or tribal governmental agency with expertise in the field of substance abuse (including, if applicable, the state agency with	A Coalition Involvement Agreement (CIA) for each of the 12 sector members. Where to Document: **Attachment 1: 12 CIAs** **For Additional information, please refer to Section V-5.5 and** Appendix D **Note**: Coalition members **cannot** represent more than one sector category and paid staff (i.e. Program Director and Project Coordinator) **cannot** serve as sector representatives. Doing so will deem an application ineligible and the application **will not** proceed to peer review.

primary authority for substance abuse) • Other organization involved in reducing substance abuse (21 USC 1531 §1032 (a)(2)(A)) An individual who is a member of the coalition may serve on the coalition as a representative of **not more than one sector category.** (21 USC 1531 §1032 (a)(2)(C))	
Requirement 2: Six Month Existence	**Evidence Required:**
The coalition **must** demonstrate that members have worked together on substance abuse reduction initiatives for a period of not less than 6 months at the time of submission of the application, acting through entities such as task forces, subcommittees, or community boards. (21 USC 1531 §1032 (a)(3)(A)) The coalition **must** also demonstrate substantial participation from volunteer leaders in the community. (21 USC 1531 §1032 (a)(3)(B))	Where to Document: - **Attachment 2** – Coalition minutes from two separate meetings that took place between March 2016 and the deadline for submission of this application. **For Additional information, please refer to Section V-5.5**
Requirement 3: Mission Statement	**Evidence Required:**
The coalition **must** have as its principal mission the reduction of youth substance use, which, at a minimum, includes the use and abuse of drugs in a comprehensive and long-term manner, with a primary focus on youth in the community. (21 USC 1531 §1032 (a)(3)(B)(4)(A)	Where to Document: - **Attachment 3** – Coalition's Mission Statement **For Additional information, please refer to Section V-5.5**
Requirement 4: Multiple Drugs of Abuse	**Evidence Required:**
The coalition **must** have developed a 12-Month Action Plan to reduce substance use among youth which **targets** multiple drugs of abuse. Substances may include, but are not limited to, narcotics, depressants, stimulants, hallucinogens, inhalants, marijuana, alcohol, and tobacco, where youth use is prohibited by federal, state, or local law. (21 USC 1531 §1032 (a)(4)(D))	12-Month Action Plan that identifies **two drugs of use to be addressed** by the coalition. Where to Document: - **Project Narrative**

Requirement 5: DFC National Evaluation Requirement	Evidence Required:
The coalition **must** establish a system to measure and report outcomes, established and approved by the DFC Administrator, to the federal government. (21 USC 1531 §1032 (a)(5)(A))	Applicants **must** demonstrate ability to comply with the DFC National Cross-Site Evaluation requirements. Where to Document: - **Attachment 12 -** DFC National Cross-Site Evaluation Information **For Additional information, please refer to Section I-2.4, Section V-5.5 and** Appendix M.
Requirement 6: Entity Eligible to Receive Federal Grants	**Evidence Required:**
The applicant **must** demonstrate that the coalition is an ongoing concern by demonstrating **that the coalition is a non-profit organization or has made arrangements with a legal entity that is** eligible to receive federal grants. (21 USC 1531 §1032 (a)(5)(A)) Organizations eligible to receive federal funds as DFC grant recipients **must** be legally recognized domestic public or private nonprofit entities. For example, state and local governments, federally recognized tribes, state recognized tribes, urban Indian organizations (as defined in P.L. 94-437, as amended), public or private universities and colleges, professional associations, voluntary organizations, self-help groups, consumer and provider services-oriented constituency groups, community- and faith-based organizations, and tribal organizations. DFC grant recipient Financial Management Requirements: Federal regulations governing SAMHSA grants (45 CFR Part 75) provide standards for financial management systems of grant award recipient organizations. To determine whether grant recipients have financial management systems that	Statement of Legal Eligibility. Where to Document: - **Attachment 4 –Signed Assurance of Legal Eligibility or Memorandum of Understanding (**MOU) between the applicant coalition and recipient/legal applicant. **For Additional information, please refer to Section V-5.5,** Appendix E **and** Appendix F.

conform to those standards, SAMHSA's Office of Financial Advisory Services (OFAS) perform Financial Capability Reviews of new or prospective grant recipients. If needed, OFAS will request that the grant recipient take necessary corrective action to conform to the financial management standards. For more information, go to http://www.samhsa.gov/grants/grants-management/policies-regulations/financial-management-requirements	
Requirement 7: Substantial Support from Non-Federal Sources	**Evidence Required:**
The coalition **must** have a strategy to solicit **substantial financial support from non-federal sources to ensure that the coalition is self-sustaining**. (21 USC 1531 §1032 (a)(5)(C)) & (21 USC 1531 §1032 (b)(1)(A)(i))	Budget narrative which describes matching funds. **Where to Document:** - SF-424, Section 18 - SF-424A - Budget Narrative **For Additional information, please refer to Section III-2 and Appendix A.**
Requirement 8: Federal Request	**Evidence Required:**
The applicant **must** not request more than $125,000 in federal funds per year. (PL 109-469 §803)	The budget may not exceed $125,000/year. **Where to Document:** - SF-424, Section 18 - SF-424A - Budget Narrative **For Additional information, please refer to Section II and Appendix A.**
Requirement 9: Zip Code Overlap	**Evidence Required:**
Two DFC-funded coalitions may not serve the same zip code(s) unless both coalitions have clearly described their plan for collaboration in their application and each coalition has independently met the eligibility requirements. (21 USC 1531 §1032 (a)(5)(C))	An applicant that proposes to serve a geographical area which overlaps with a community served by other applicant coalitions or existing DFC coalitions **must** provide a Letter of Mutual Cooperation between these coalitions acknowledging the geographical overlap and their efforts to collaborate.

	Where to Document: - **Attachment 5** – Letter(s) of Mutual Cooperation, signed by both coalitions, **or** statement that there is no overlap between the applicant and other coalitions. - **Attachment 9** – General Applicant Information Table (Appendix J). **For Additional information, please refer to Section V-5.5.**
Requirement 10: One grant at a time	**Evidence Required:**
Grant recipients may be awarded only one grant at a time through the DFC Support Program.	Applicants **must** sign and submit the Assurance of One DFC Grant at a Time. Where to Document: - **Attachment 6** –Assurance of One DFC Grant at a Time (Appendix G). **For Additional information, please refer to Section V-5.5.**
Requirement 11: No more than 10 years of DFC funding	**Evidence Required:**
In order to receive a DFC grant, coalitions may not have received 10 years of DFC funding.	Applicants **must** sign the Assurance of DFC 10-Year Funding Limit in Appendix H. Where to Document: - **Attachment 7** – Assurance of DFC 10-Year Funding Limit **For Additional information, please refer to Section V-5.5.**

2. COST SHARING and MATCH REQUIREMENTS

The DFC authorizing legislation requires recipients to demonstrate that they have matching funds ("match") from non-federal sources equivalent to or greater than federal funds requested from the DFC Support Program. Applicants **must** itemize the match separately in the budget and explain the match separately in the Budget Narrative. A sample Budget Narrative is provided in

Appendix A of this FOA. Applicants in their first cycle of DFC funding (Year One - Year Five), and those in Year Six, are required to have 100 percent match (1:1) from non-federal sources. Beginning in Year Seven, the percentage increases. The table below indicates the percentage of match required for DFC grant recipients in each year of the grant.

Table 2: Percentage of Match

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

Cash or 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 federal cost principles (see Section IV-4). Applicants cannot submit match that would not be an allowable expense of 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.

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

IV. APPLICATION AND SUBMISSION INFORMATION

1. CONTENT AND GRANT APPLICATION SUBMISSION

Applicants **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 Support Program.

GRANTS.GOV

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

On the Grants.gov site (http://www.Grants.gov), select the Apply for Grants option from the Applicants Tab at the top of the screen. Under STEP 1, click on the red button labeled:

'Download a Grant Application Package'. Enter either the Funding Opportunity Number (SAMHSA's FOA #) or the Catalogue of Federal Domestic Assistance (CFDA) Number exactly as they appear on the cover page of this FOA, then click the Download Package button. In the Instructions column, click the Download link.

You can view, print, or save all of these forms. Completed forms can also be saved and printed for your records. The following forms are required for all applications:

- 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 required to complete your application on SAMHSA's website (http://www.samhsa.gov/grants/applying). These include:

- Funding Opportunity Announcement (FOA) – Provides a description of the program, specific information about the availability of funds, and instructions for completing the grant application. This document is the FOA;
- Assurances – Non-Construction Programs; and
- Certifications and other forms, i.e., HHS-690 & SMA170, etc.

IMPORTANT NOTE: Please refer to Appendix B for formatting requirements and screen out criteria that will reject an application.

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

1.1 Required Application Components

Applications **must** include all required application components. These components **must** be submitted in the order detailed below. Please refer to Appendix B and Appendix C for additional formatting and submission requirements (e.g., font size, page margins, Grants.gov instructions, etc.) and resources for obtaining assistance.

- **Application for Federal Assistance (SF-424)**: This form **must** be completed by applicants for all SAMHSA grants. In addition, all applicants **must** provide a

Dun and Bradstreet (DUNS) number and register in the System for Award Management (SAM). See Appendix B for information on how to obtain a DUNS number and register in SAM.

NOTE: If an applicant's SAM account expires, the renewal process requires the same validation with IRS and DoD (Cage Code) as a new account requires. This can take up to one month. It is highly recommended that applicants renew their accounts prior to the expiration date. The account update process takes only 24-48 hours.

- **Budget Information Form**: Use SF-424A. Fill out Sections B, C, and E of the SF- 424A. A sample budget and justification is included in Appendix A of this document**.** Your completed SF-424A should reflect the final numbers as they appear in your Budget Narrative.

- **Table of Contents: The bottom right corner of every page in the application must be numbered**, including the Attachments, beginning with the Table of Contents as Page 1. In the Table of Contents, include the page numbers for each of the major sections of the application and each attachment. Hand numbering of pages is allowable.

- **Community Overview:** The Community Overview describes the key features of the community. It should be **no longer than 1 page** in length.

- **Project Narrative:** The Project Narrative (Section V-5.3 of this FOA) describes the efforts the coalition will undertake to address youth substance use. It consists of five questions, and **must** be **no longer than 25 pages**.

- **Budget Narrative:** The Budget Narrative (Section V-5.4 of this FOA) provides an itemized line item breakdown and narrative detail about both the federal request and the non-federal match.

- **Attachments 1 through 13**: Please clearly label each attachment provided. Applications with additional attachments will **not** receive a higher score. All attachments **must** be labeled and identified with a page number.

- **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 face page (SF-424) of the application. **Do not include the list of certifications with your 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 is included with the application package found on the Grants.gov 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 "grassroots" 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 referendums/initiatives to urge those representatives to vote in a particular way. This form is included in the application package and **must** be submitted by all applicants applying for a DFC grant. If not applicable please indicate on form.

- **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 this DFC application is a New (Year 1 or Year 6), and **not** a Non-Competing Continuation, Competing Continuation or Supplemental application, as well as Parts A through D. This checklist is included in the Grants.gov application packet.

- **Documentation of non-profit status** as required in the Checklist.

- **Pre-Submission Verification Checklist:** Use the checklist found in Appendix O. This verification ensures that you have accurately documented the eligibility requirements and included all major components of the application.

1.2 Application Formatting Requirements

Applications **must** comply with SAMHSA's formatting requirements. Please refer to Appendix B, **Section IV – Formatting and Systems Validation** for SAMHSA's basic application formatting requirements. Applications that do not comply with these requirements will be **screened out** and **will not** proceed to peer review.

2. APPLICATION SUBMISSION REQUIREMENTS

Applications are due by **11:59 PM** (Eastern Time) on **March 15, 2017.**

Applications must be submitted through http://www.Grants.gov**.** Please refer to Appendix C, for information on how to obtain assistance in navigating the registration and application processes. SAMHSA requires electronic submission for all grant applications. **Within 30 days of receipt of an application, the Business Official will be notified by email 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 Division 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 (E.O.) 12372, as implemented through Department of Health and Human Services (DHHS) regulation at 45 CFR Part 100. Under this Order, states may design their own processes for reviewing and commenting on proposed federal assistance under covered programs. See Appendix K for additional information on these requirements as well as requirements for the Public Health Impact Statement.

4. FUNDING LIMITATIONS/RESTRICTIONS

The standards set forth in 45 CFR Part 75 *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards,* became effective December 26, 2014. Cost principles describing allowable and unallowable expenditures for HHS grant recipients, including SAMHSA grant recipients, are provided in 45 CFR Part 75.

Table 3: Cost Principles

Applies to:	Cost Principle:
Educational Institutions	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, SAMHSA's DFC Support Program grant recipients **must** comply with the following funding restrictions:

- Food is **generally** unallowable. Exceptions within the DFC Support Program may include food used as a small incentive (not to exceed $ 3.00 per person) to encourage participation in a community-wide event. Food costs are **not** allowable for general coalition or subcommittee meetings.
- No more than **10 percent** of the total grant award may be used for **data collection and evaluation** purposes unless approved by a SAMHSA Government Project Officer and Grants Management Specialist.
- DFC grant funds may **not** be passed through by contract or any other method to another entity to conduct the programmatic work on the DFC Program. The funded grant recipient and coalition are expected to perform the substantive role and manage the efforts carried out by this grant.
- The Authorized Representative or Business Official charged with financial oversight responsibilities for the DFC grant award **must** be an employee of the recipient organization and identified in the 'Personnel' budget category.
- The Program Director must be an employee of the recipient organization, overseeing the day to day operations of the grant, and must be identified in the personnel' budget category as either Federal or Non-Federal.
- DFC grant funds may **not** be used to provide funding to community organizations

through mini-grants, including one coalition funding another coalition.

- DFC grant funds may **not** be utilized for the following: law enforcement equipment, drug search detection canines or related training, drug courts, lighting, or community gardening efforts.
- DFC grant funds may not be used for stipends, as defined in the HHS Grants Policy Statement (GPS).

V. APPLICATION REVIEW INFORMATION

1. GENERAL INSTRUCTIONS

For FY 2017, there are **five questions** in the Project Narrative (Section A) and only these questions may be used when applying for FY 2017 DFC funding.

Failure to use the correct FOA will result in an application being screened out and not proceeding to peer review.

2. EVALUATION CRITERIA

The DFC Support Program's peer review process utilizes current or former DFC grant award recipients and experienced substance abuse prevention specialists to serve as peer reviewers. Each application is assigned to a panel of three peer reviewers for scoring, and the composite of the three scores becomes the application's final score. 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. DFC grants **are not** awarded based on how many DFC-funded coalitions are within a geographic boundary (e.g., state, county, or city).

NOTE: The DFC Act **requires that all** applications be considered and reviewed equally. A Year Six applicant's past DFC funding is **not** a factor in funding decisions. **Those applying for Year Six funding do not receive a higher priority than those applying for Year One funding.**

3. APPLICATION SCORING INSTRUCTIONS

Peer reviewers will score the five questions that comprise the Project Narrative by totaling the points for each question to create a cumulative score (scores will range from 0 to 100 points).

3.1 Project Narrative Scoring

Applications that meet all of the DFC statutory eligibility requirements will go to peer review to be scored on a 100-point scale. The primary funding decision criterion is the application's final peer review score. All final grant award decisions will be made by ONDCP's DFC Administrator, consistent with the DFC Act of 1997. ONDCP may also take into consideration factors relating to rural, American Indian/Alaska Native, and economically disadvantaged

communities.

4. REVIEW AND SELECTION PROCESS

Applications will be screened jointly by ONDCP and SAMHSA to determine whether applicants meet all Statutory Eligibility Requirements as outlined in Table 1. Applications submitted by coalitions that meet all Statutory Eligibility Requirements will then be scored by a peer review panel. The scoring criteria can be found in Appendix P of this application.

5. RESPONDING TO THE FOA

5.1 Community Overview (Not Scored)

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

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

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

In writing the Project Narrative use the instructions below that have been tailored to the DFC Support Program.

- The Project Narrative **cannot** be longer than 25 pages. Applications with a Project Narrative that exceeds the 25 page **limit** will be deemed ineligible and **will not** go to peer review.
- Restrictions related to font size and page margins found in Appendix B **must** be followed or the application will be deemed ineligible and will not proceed to peer review.
- Respond to each question individually, building upon previous responses so all answers together tell a cohesive story of the community, the coalition, and their efforts to prevent and reduce youth substance use.
- Write all responses and required information under the correct question. Answer each question completely. In the event an applicant cannot respond to a specific element, the applicant **must** explain why they are unable to respond and offer a possible solution. The Project Narrative will be scored by how well each of the elements is answered.
- **Do not** direct peer reviewers to a previous answer in response to another question. **Do not** direct peer reviewers to documents in the Attachments.

5.3 Section A: Project Narrative Questions

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

COALITION HISTORY AND COALITION MEMBER INVOLVEMENT

1. What is the history of the coalition and how does it currently operate to prevent youth substance use in the community? (10 points)

A. Describe the history of the coalition to include information on what events led to the formation of the coalition, the challenges it has experienced in becoming a viable coalition, and the impact it has had on addressing youth substance use in the community.
B. Describe the organizational structure and operations of the coalition to include information on the leadership of the coalition, decision-making processes, by-laws, workgroups, and financial management.
C. Describe the qualifications of each of the 12 sector representatives and their role in the coalition to prevent and reduce youth substance use.
D. Describe how your coalition currently engages youth in the problem-solving process in your community.
E. Describe the strategies that have been implemented to recruit and retain members and to ensure that the membership of the coalition is representative of the population in the community.

STATEMENT OF THE PROBLEM

2. What are the current youth substance use problems in your community and the methods of assessment and data collection? (25 points)

A. Describe the youth substance use problems in your community.
B. Describe the unique local conditions that contribute to problems, such as environmental conditions and/or policies and practices, community norms, geographic variables or economic conditions.
C. Describe your coalition's community assessment efforts. Information should include data used to identify substance use problems in your area as well as specific issues that contribute to youth substance use.
D. Provide current data and discuss how youth substance use has contributed to problems among youth in the community, such as school dropout rates, school suspensions, juvenile court data, ER admissions, or treatment admission data.
E. Using needs assessment data provide current quantitative (statistical survey data) and qualitative data (focus groups, town hall meetings, informal surveys) on youth substance

use for alcohol, tobacco, marijuana, and prescription drugs for the following four measures: past 30-day use, perception of risk/harm of use, perception of parental disapproval of use, and perception of peer disapproval of use.

F. Based on the above, describe the nature and extent of the youth substance use problems that your coalition intends to address. In your response, be as specific as possible about the substances on which your coalition plans to focus and the demographics of the youth who are using these substances.

12-MONTH COALITION ACTION PLAN

3. What is the coalition's 12-Month Action Plan for addressing youth substance use in the community? (30 points)

This question is answered by developing a detailed 12-Month Action Plan using Table 4. The Action Plan should foster community level change by including a combination of goals, strategies, and activities. Applicants must use an appropriate prevention planning framework for ensuring a comprehensive 12-Month Action Plan (i.e., SPF, Seven Strategies for Community Level Change, etc.). Refer to sections 2.1 and 2.3 for more information on prevention planning frameworks.

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

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

If additional goals are included in the 12-Month Action Plan, they **must** also include measureable objectives, strategies, and activities.

- Applicants **must** use the Action Plan template provided in Table 4.
- The 12-Month Action Plan **must** fall within the text of the Project Narrative and will count towards the 25 page limit.
- The 12-Month Action Plan **must** be in Times New Roman, 12-point font, and adhere to all instructions provided in Appendix B, Overview of Application and Submission Requirements.
- The 12-Month Action Plan **must** cover the period of September 30, 2017 to September 29, 2018.
- The 12-Month Action Plan **must** include at least the two DFC goals provided in Table 4.
- The 12-Month Action Plan **must** include an appropriate prevention planning framework for ensuring a comprehensive 12-Month Action Plan (i.e., SPF, Seven Strategies for Community Level Change, etc.).
- The 12-Month Action Plan **must** address at least two named substances. The strategies and activities **must** be specific to the substances that your coalition will be addressing.
- Each substance the coalition is addressing **must** have a separate objective.
- The objectives **must** be measurable and include the following:
    - Objectives **must** indicate type of change

- Objectives **must** indicate how much change will occur including the specific amount of increase or decrease
- Objectives **must** include the specific population to be addressed. If the population is youth, then ages of youth or grade level **must** be identified
- Objectives **must** include a specific date (Month/Year) by when change will be accomplished
- Objectives **must** indicate how change will be measured

Table 4: 12-Month Action Plan

DFC Goal One: Increase community collaboration

Objective 1: *Provide measurable objective*

Strategy 1: *Provide specific strategy*

Activity	Who is responsible?	By when?

Strategy 2: *Provide specific strategy*.

Activity	Who is responsible?	By when?

DFC Goal Two: Reduce youth substance abuse

Objective 1: *Provide measurable objective.*

Strategy 1: *Provide specific strategy.*

Activity	Who is responsible?	By when?

Strategy 2: *Provide specific strategy*.

Activity	Who is responsible?	By when?

EVALUATING THE EFFECTIVENSS OF THE 12-MONTH ACTION PLAN

4. How will the coalition monitor and evaluate the effectiveness of the 12-Month Action Plan? (20 points)

A. Describe the processes that will be implemented to collect the data needed to measure the effectiveness of the 12-Month Action Plan.
B. Describe how the data will be analyzed and monitored to include the role of key staff and sector members in these processes.
C. Describe how the coalition will make a determination that modifications need to be made to the 12-Month Action Plan to more effectively achieve the goals and objectives in the 12-Month Action Plan.
D. Describe how the coalition plans to disseminate the data outcomes to the community and how it will ensure that all segments of the community receive the information.

SUCCESSFUL IMPLENTATION OF THE DFC GRANT

5. How will the coalition effectively address the youth substance use problem in the community? (15 points)

A. Describe how the coalition will work with other community systems/organizations to enhance prospects for successful implementation of the DFC grant.
B. Describe the strengths of the community that could contribute to the coalition having a positive impact in addressing youth substance use and how the coalition will build upon these strengths.
C. Describe the factors in the community that could impede progress being made in addressing youth substance use and how the coalition plans to proactively address these challenges.
D. Describe how the coalition plans to communicate its successes and challenges to the community and discuss how this plan will take into consideration the diversity in the community (family structure, geography, educational attainment, culture, and socioeconomic status).

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

5.4 SECTION B: BUDGET NARRATIVE (NOT SCORED)

In this section, applicants **must** provide a 12-month Budget Narrative to include budget details and justification for expenditures. The Budget Narrative **must** include a description of matching resources and other support that the coalition will receive. No more than **10 percent** of the total grant award may be used for **data collection and evaluation** purposes unless approved by a SAMHSA Government Project Officer and Grants Management Specialist. Applicants **must** use the template provided in Appendix A, including providing a narrative description for each budget category for both federal requests and non-federal match. **There is no page limit for the Budget Narrative.** When submitting your application through Grants.gov, the Budget Narrative **must** be submitted as file Budget Narrative File (BNF). See Appendix B, within the Required and Standard Application Components Table.

5.5 SECTION C: REQUIRED ATTACHMENTS (NOT SCORED)

All attachment pages must be properly labeled and numbered. Applicants may hand number pages if necessary. Although these attachments are not scored by peer reviewers, they are required in order for an application to move forward to peer review. The attachments (Section C) should follow Sections A (Project Narrative) and B (Budget Narrative) of the application with continuous page numbers. It is extremely important to order and label these attachments as indicated below. Additionally, the FOA provides applicants with several appendices. Applicants **must** submit all attachments as appendices or the application will be screened out and **will not** proceed to peer review.

Attachment 1 - Coalition Involvement Agreements: Applicants **must** include one Coalition Involvement Agreement (CIA) for each of the 12 sectors. Two separate signatures **are required** on each CIA. One signature **must** be that of the individual listed as the coalition sector representative, and the other **must** be the signature from a coalition chair, paid staff, or any other individual who officially represents the coalition. Neither paid staff (current or proposed), such as the Program Director and Project Coordinator, nor the person signing the CIA on behalf of the coalition (chairperson or any other individual who officially represents the coalition) may serve as one of the 12 sector representatives.

All signatures must be hand-written **and** hand-dated**. Electronic signatures will not be accepted.** CIAs **cannot** be more than 12 months old at the time of application submission. See Appendix D.

Attachment 2 - Two Sets of Coalition Meeting Minutes: Applicants **must** include coalition minutes from two separate meetings that took place between March 2016 and March 15, 2017. Meeting minutes **must** include month, date, and year; demonstrate coalition membership involvement; and include attendees, noting the sector that each attendee represents. All 12 sectors are not expected to be listed in either set of the required meeting minutes.

Attachment 3 - Coalition Mission Statement: Applicants **must** provide a copy of the coalition's mission statement. The mission statement cannot be that of an outside agency being used as the grant recipient/legal applicant (if applicable) for the coalition, but **must** be the coalition's mission statement. The principal mission of the coalition **must** be to prevent youth substance use.

Attachment 4 - Assurance of Legal Eligibility or Memorandum of Understanding between Legal Applicant (Grant Award Recipient) and Coalition: An applicant coalition that is eligible to receive federal grant funds and is applying for this grant on its own **must** complete Appendix E. If a coalition is not eligible to receive federal grant funds on its own, the coalition **must** make arrangements with an entity eligible to apply for the grant on behalf of the coalition. If applicable applicants **must** submit a Memorandum of Understanding (MOU) between the two parties, i.e., the coalition and the legal applicant. The MOU must not be more than 12 months old at the time of application. Refer to Appendix F. **NOTE**: One individual cannot sign as both the legal applicant and as the coalition representative. The MOU **must** be hand-signed and hand-dated by the authorized coalition official and the business official for the fiscal agent.

Attachment 5 - Letter of Mutual Cooperation: Each applicant that proposes to serve a community that overlaps an existing DFC coalition's zip code area **must** provide a Letter of Mutual Cooperation between the coalitions outlining their efforts to collaborate. If there are no zip code overlaps identified, simply state this and include it as Attachment 5.

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

Attachment 7 - Assurance of DFC 10-Year Funding Limit: Applicants **must** sign and submit the Assurance of DFC 10-Year Funding Limit document found in Appendix H.

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

Attachment 9 - General Applicant Information: Applicants **must** complete each item (numbers 1-22) in the table provided in Appendix J.

Attachment 10 - Intergovernmental Review (E.O. 12372) Requirements: If applicable, include a copy of the letter to the Single State Agency (SSA) showing that the applicant has informed the SSA contact person that an application has been submitted for a DFC grant. Information related to this attachment is found in Appendix K. If not applicable, applicants should provide a statement to that effect and include it as Attachment 10.

Attachment 11 - Disclosure of Prior DFC Funding: Applicants **must** complete the information requested in Appendix L related to prior DFC funding for the legal applicant/grant award recipient and applicant coalition for this FOA. Applicants **must** also indicate the year of funding for which they are applying.

Attachment 12 - DFC National Cross-site Evaluation Requirements: Applicants **must** complete the form included in Appendix M related to the ability to collect the data necessary to be in compliance with the DFC National Cross-site Evaluation. Regardless of the substances a coalition is choosing to address, successful applicants **must** collect data on the DFC Core Measures, see Section I-2.4.

Attachment 13 - Congressional Notification: All applicants **must** include a Congressional Notification. This information will be utilized to provide 48-hours' notice to your Congressional Members should you receive DFC funding. Using the template provided in Appendix N, complete all the information exactly as provided in the template.

Forms and Assurances - HHS 690 form: Applicants **must** complete and submit the HHS 690 form to the Office of Civil Rights. Reference detailed address on the form. Every grant applicant must have a completed HHS 690 form (PDF | 291 KB) on file with the Department of Health and

Human Services. Your signature acknowledges that you agree to comply with Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, Title IX of the Education Amendments of 1972, and the Age Discrimination Act of 1975. **This form is available on the SAMHSA website via:** http://www.samhsa.gov/grants/applying/forms-resources.

Charitable Choice Form - SMA-170 – Applicants **must** submit an Assurance of Compliance with SAMHSA Charitable Choice Statutes and Regulations form SMA 170. **This form is available on the SAMHSA website via:** http://www.samhsa.gov/grants/applying/forms-resources.

Pre-Submission Verification Checklist – The final page of your application should be the checklist found in Appendix O, 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. ADMINISTRATION INFORMATION

1. AWARD NOTICES

Prior to the end of **September 2017**, the list of awardees will be posted on the DFC website at http://www.whitehouse.gov/ondcp/Drug-Free-Communities-Support-Program. For all awardees, a Notice of Award (NoA) will then be sent electronically to the individual listed as the Business Official on the Application for Federal Assistance. The NoA is the sole obligating document that allows the grant recipient to receive federal funding for work on the grant project.

By the end of **October 2017**, all applicants whose applications were sent to the Independent Review Group (IRG) will receive an email from SAMHSA. The letter will be addressed to the individual listed as the Business Official on the Application for Federal Assistance. This document contains the peer review score and summarized comments. If an application is not funded, the applicant may re-apply if there is another receipt date for the program in the future.

NOTE: DFC grant funds may not be used to supplant current funding of existing activities. "Supplant" is defined as replacing funding of a grant recipient's existing program with funds from a federal grant.

2. REPORTING REQUIREMENTS

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

3.0 PROGRESS AND FINANCIAL REPORTS

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

3.1 PUBLICATIONS

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

- Provide the GPO and SAMHSA Publications Clearance Officer with advance copies of any 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 use prevention community.

VII. AGENCY CONTACTS

For questions about program issues contact:

DFC FOA Helpline Team Division of
Community Programs (240) 276-1270
dfcnew@samhsa.hhs.gov

For questions on grants management and budget issues contact:

Odessa Crocker
Office of Financial Resources
Division of Grants Management
Substance Abuse and Mental Health Services Administration
5600 Fishers Lane
Room 17E25D
Rockville, Maryland 20857
(240) 276-1400
DGMSAMHSA@samhsa.hhs.gov

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

Budget Preparation

The Budget Narrative is used to determine reasonableness and allowability of costs in a DFC application. All of the proposed costs listed, whether supported by federal or matching funds, **must** be reasonable, and 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 Federal Policies and Regulations available at http://www.samhsa.gov/grants/grants-management/policies-regulations to determine cost sharing expectations and restrictions on the types of costs that may appear in the budget.

Budget Terminology

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

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

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

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

3. **Consistency** - Regulations regarding cost assignment **must** be consistent for all work of the organization under similar circumstances, regardless of the source of funding, to avoid duplicate charges.
4. **Conformance** - Conformance with limitations and exclusions contained in the Terms and Conditions of award, including those in the cost principles, may vary by the type of activity, the type of grant 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. The Program Director and Project Coordinator must be listed under 'Personnel' in the Budget Narrative and not identified under 'Contracts'.

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

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

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

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

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:

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 grant recipient's matching requirement.

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

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

Grant recipients are required to submit an annual budget request each year. The annual amount requested can be less than $125,000 due to insufficient match, but can never be greater than the amount indicated in this application. Therefore, it is more advantageous to request the full $125,000 for each out-year of funding. **Ensure against conflict of interest within proposed contractual costs; see the definition of Conflict of Interest and examples below**:

Reference – 45 CFR 75 Statement, issued January 1, 2007.	Grant award recipients are required to alert their Grants Management Specialist (GMS) and the Government Project Officer (GPO) of any organizational conflicts of interest as well as noncompetitive practices among contractors that may restrict or eliminate competition.

NOTE: In the Budget Narrative, applicants **must** also provide **Table 16: Future Years Budget Summary** and **Table 17: Calculation of Future Years and Projected Total**.

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

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

Table 1: FEDERAL REQUEST

Position	Name	Annual Salary/Rate	Level of Effort	Cost
Program Director	Dee F. See	$64,890	10%	$6,489
Project Coordinator	TBD	$46,276	100%	$46,276
			TOTAL	**$52,765**

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 2: NON-FEDERAL MATCH

Position	Name	Annual Salary/Rate	Level of Effort	Cost
Clerical Support	John Doe	$13.38/hr. x 100 hr.	100 hrs/year	$1,338
			TOTAL	**$1,338**

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

SOURCE OF MATCH FUNDS: State source of match funds.

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

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

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

Table 3: FEDERAL REQUEST

Component	Rate	Wage	Cost
FICA	7.65%	$52,765	$4,037
Workers Compensation	2.5%	$52,765	$1,319
Insurance	10.5%	$52,765	$5,540
		TOTAL	$10,896

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

Table 4: NON–FEDERAL MATCH

Component	**Rate**	**Wage**	**Cost**
FICA	7.65%	$1,338	$102
Workers Compensation	2.5%	$1,338	$33
Insurance	5.5%	$1,338	$74
		TOTAL	$209

NARRATIVE JUSTIFICATION: Enter a description of the fringe benefits 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): $10,896

NON-FEDERAL MATCH (enter in Section B column 2 line 6b of form SF-424A): $209

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**: Grant award recipients will be expected to follow federal travel policies found at http://www.gsa.gov, unless they have their own written travel policy. GSA rates will be used as a reasonableness test.

Table 5: FEDERAL REQUEST

Purpose of Travel	**Location**	**Item**	**Rate**	**Cost**
New Grant Award Recipient Training	Washington, DC	Airfare	$300/flight x 2 persons	$600
		Hotel	$200/night x 2 persons x 4 nights	$1,600

Purpose of Travel	Location	Item	Rate	Cost
		Per Diem (meals and incidentals)	$64/day x 2 persons x 4 days	$512
Coalition Academy Week 1	Birmingham, AL	Airfare	$200/flight x 2 persons	$400
Coalition Academy Week 1	Birmingham, AL	Car Rental	$200/week, unlimited miles	$200
Coalition Academy Week 2	Birmingham, AL	Airfare	$200/flight x 2 persons	$400
Coalition Academy Week 2	Birmingham, AL	Car Rental	$200/week, unlimited miles	$200
Coalition Academy Week 3	Birmingham, AL	Airfare	$200/flight x 2 persons	$400
Coalition Academy Week 3	Birmingham, AL	Car Rental	$200/week, unlimited miles	$200
Local travel	County-wide	Mileage	3,000 miles@.50/mile*	$1,500
			TOTAL	**$6,012**

NARRATIVE JUSTIFICATION: Describe the purpose of travel and how costs were determined. The grant requires that a total of two Key Personnel attend the New Grant Award Recipient Training in Washington, DC. Attendance at the National Coalition Academy is required of all Year One grant award recipients. In addition to the required trainings, funds for local travel are needed to attend local meetings, project activities, and training events. Local travel rate should be based on agency's personally owned vehicle (POV) reimbursement rate, which should correspond with the GSA rate found at http://www.gsa.gov.* Please check this website regularly for changes.

Table 6: NON-FEDERAL MATCH

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

NARRATIVE JUSTIFICATION: Enter a description of the travel matching funds provided and how their use will support the purpose and goals of this proposal. Describe how the matching funds will enhance the federal budget request. Local travel rate should be based on

agency's POV reimbursement rate, which should correspond with the GSA rate found at http://www.gsa.gov/portal/category/26429 * Please check this website regularly for changes.

SOURCE OF MATCH FUNDS: State source of match funds.

FEDERAL REQUEST (enter in Section B column 1 line 6c of form SF-424A): $6,012

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

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

Table 7: FEDERAL REQUEST

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

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

Table 8: NON-FEDERAL MATCH

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

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

SOURCE OF MATCH FUNDS: State source of match funds.

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

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

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

Table 9: FEDERAL REQUEST

Item(s)	Rate	Cost
General office supplies	$50/mo. x 12 mo.	$600
Postage	$37/mo. x 8 mo.	$296
Coalition promotional items	200 items @ $1.39 each	$278
Laptop computer	$600	$600
Printer	$300	$300

Item(s)	Rate	Cost
Projector	$700	$700
Copies	8,000 copies x $.10/copy	$800
Laptop computer update	$50	$50
	TOTAL	**$3,624**

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

Table 10: NON-FEDERAL MATCH

Item(s)	Rate	Cost
General Office Supplies	$50/mo. X 12 mo.	$600
Computer	$500	$500
Postage	$37/mo. x 4 mo.	$148
Computer update (if needed)	$50	$50
	TOTAL	**$1,298**

NARRATIVE JUSTIFICATION: Enter a description of the supplies match provided and how their use will support the purpose and goals of this proposal. Describe how the matching funds will enhance the federal budget request. Please note that items such as computers, desks, and projection equipment may be counted as match only once throughout the life of the project.
SOURCE OF MATCH: State source of match funds.
FEDERAL REQUEST (enter in Section B column 1 line 6e of form SF-424A): $3,624

NON-FEDERAL MATCH (enter in Section B column 2 line 6e of form SF-424A): $1,298

F. Contract: A contractual arrangement cost to carry out a portion of the programmatic effort by a third-party contractor or for the acquisition of goods or services under the grant. Such arrangements may be in the form of consortium agreements or contracts. If there is more than one contractor, each **must** be budgeted separately. A consultant is a non-employee retained to provide advice and expertise in a specific program area for a fee. The grant award recipient **must** establish written procurement policies and procedures that are consistently applied. **SAMHSA staff may request a copy of procurement policies and all contracted agreements.** All procurement transactions are required to be conducted in a manner to provide, to the maximum extent practical, open and free competition. The grant award recipient 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. It is the grant award recipient's responsibility to conduct the day-to-day operations of the grant program. Grant award recipients may **not** serve as a conduit for the funds by passing them on to another agency. Therefore, the awarded grant award recipient **must** have oversight of the day-to-day operations.

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

Table 11: FEDERAL REQUEST

Name	Service	Rate	Other	Cost
To be selected	Environmental Strategy Consultation	$150/day x 35 days = $5,250	Travel 380 miles @ $0.50/mile* = $190	$5,440
To be selected	Board and Committee Leadership Consultation	$300/trainer x 2 trainers x 5 days = $3,000	$50/hour for individual TA x 30 hours = $1,500	$4,500
To be selected	Evaluation Contractor	$100/hour x 100 hours to include collection of core measures, creation of evaluation report, coalition evaluation support (e.g., member survey), and activity evaluation support (e.g., pre/post survey development)		$10,000
To be selected	Substance Abuse Training for Coalition Members	Trainers:$300/day x 4 days = $1,200	Materials: approx. $5/person x 25 people = $125 Room Rental = $75 Travel for Trainers: Flight $300/person x 2 people = $600 Per Diem: $46/day x 4 days x 2 people = $368	$2,368
Local Police Department	Alcohol Compliance Checks	6 officers @ $50/hour x 6 checks @ $300/check		$1,800

Name	Service	Rate	Other	Cost
To be selected	Responsible Server Three-Day Training	Trainer: $500/day x 3 days		$1,500
			TOTAL	**$25,608**

NARRATIVE JUSTIFICATION: Explain the need for each agreement and how it will support the purpose and goals of this proposal. Local travel rate should be based on agency's POV reimbursement rate, which should correspond with the GSA rate found at http://www.gsa.gov/portal/category/26429 .* Please check this website regularly for changes.

Table 12: NON-FEDERAL MATCH

Name	Service	Rate	Other	Cost
Coalition members	Participation in coalition activities outlined in the 12-Month Action Plan	18 members @ $35/hr. x 5 hr./mo. (average) x 12 mo.		$37,800
Local School District	Student Assistance Program – CIA demonstrates breakout of services	3 counselors @ $51.33/hr.	100 hrs. each	$15,400
Local Police Department	Alcohol Compliance Checks	8 officers @ $50/hour x 6 checks	1 hour each	$2,400
Youth members	Alcohol Compliance Checks	8 youth @ $50/youth x 6 checks = $2,400 16 parent chaperones x 6 checks x $25/check = $2,400		$4,800
Media sponsorship	Local cable station agrees to run coalition promotion. PSA an average of 5 times/week for 24 weeks	5 PSAs/week $50/PSA x 24 weeks		$6,000

Name	Service	Rate	Other	Cost
Advertising	Billboards	$600 x 12 = $7,200		$7,200
			TOTAL	**$73,600**

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

SOURCE OF MATCH FUNDS: State source of match funds.
FEDERAL REQUEST (enter in Section B column 1 line 6f of form SF-424A): $25,608

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

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

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

Table 13: FEDERAL REQUEST

Item	Rate	Cost
Rent*	$550/mo. x 12 mo.	$6,600
Telephone (land line)	$50/mo. x 12 mo.	$600
Student Surveys	$1/survey x 4884	$4,884
Brochures	$0.89/brochure x 1,500 brochures	$1,335
Meth literature for merchants	Window Clings: 1,500 clings x $2 each = $3,000 Handouts: 3,000 copies x $0.50 each = $1,500	$4,500
	TOTAL	**$17,919**

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

[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.

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

Table 14: NON-FEDERAL MATCH

Item	Rate	Cost
Space rental	10 x $830 per event	$8,300
School Peer Leadership Program	$25,200	$25,200
Internet service	$26/mo. x 12 mo.	$312
Student surveys	$1/survey x 1946 surveys	$1,946
Printing	$300/run x 6 runs	$1,800
Transition program for youth & parents	1 person x $25/hr. x 3 hrs. = $75 100 parent packets x $3.50/packet = $350	$425
Health Fair	Coordination and administration CIA demonstrates breakout of services	$1,500
Physician/Health Provider diagnostic tools and training	Coordination and administration CIA demonstrates breakout of services	$1,700
Drug-Free Workplace Initiative	Coordination and administration CIA demonstrates breakout of services	$3,000
Underage Drinking Initiative	Coordination and administration CIA demonstrates breakout of services	$2,700
	TOTAL	**$46,883**

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): $17,919

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

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

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

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TOTAL DIRECT CHARGES:

FEDERAL REQUEST **– (enter in Section B column 1 line 6i of form SF-424A):** $121,350

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

INDIRECT CHARGES:

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

TOTAL: (sum of 6i and 6j)

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

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

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

Period

Table 15: BUDGET SUMMARY

Category	Federal Request	Non–Federal Request	Total
Personnel	$52,765	$1,338	$54,103
Fringe	$10,896	$209	$11,105
Travel	$6,012	$1,556	$7,568
Equipment	$0	$0	$0
Supplies	$3,624	$1,298	$4,922
Contractual	$25,608	$73,600	$99,208
Other	$17,919	$46,883	$64,802
Total Direct Costs	$116,824	$124,8844,894	$241,708
Indirect Costs	$4,526	$0	$4,526
Total Project Costs	$121,350	$1244,884	$246,234

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

Table 16: FUTURE YEARS BUDGET SUMMARY

Projected Future Years	Federal Request	Non-Federal Match
Year 2		
Year 3		
Year 4		
Year 5		
TOTAL (2-5)		

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

Table 17: FUTURE YEARS AND PROJECTED TOTAL*

Category	2nd Project Year Federa	2nd Project Year Match	3rd Project Year Federal	3rd Project Year Match	4th Project Year Federal	4th Project Year Match	5th Project Year Federal	5th Project Year Match
Personnel								
Program Director	$6,489	$0	$6,489	$0	$6,489	$0	$6,489	$0
Project Coordinator	$46,276	$0	$46,276	$0	$46,276	$0	$46,276	$0
Clerical Support	$0	$1,338	$0	$1,338	$0	$1,338	$0	$1,338
Fringe Benefits	$10,896	$275	$10,896	$275	$10,896	$275	$10,896	$275
Travel	$5,000	$2,000	$5,000	$2,250	$4,000	$2,500	$4,000	$2,500
Equipment	$0	$0	$0	$0	$0	$0	$0	$0
Supplies	$4,500	$2,000	$4,500	$2,000	$4000	$2,000	$4,000	$2,000
Contract								
Evaluation	$4,500	$0	$4,500	$0	$4,500	$0	$4,500	$0

Category	2nd Project Year Federal	2nd Project Year Match	3rd Project Year Federal	3rd Project Year Match	4th Project Year Federal	4th Project Year Match	5th Project Year Federal	5th Project Year Match
Targeted Media	$15,000	$20,000	$15,000	$30,000	$15,000	$30,000	$10,000	$35,000
Training	$4,000	$0	$3,000	$0	$2,500	$0	$2,500	$0
Compliance Checks	$1,000	$12,000	$1,500	$14,000	$1,500	$14,000	$1,500	$14,000
Coalition Members	$0	$35,000	$0	$40,000	$0	$40,000	$0	$40,000
Other	$24,497	$52,387	$24,997	$35,137	$26,997	$34,887	$31,997	$29,887
Total Direct Costs	$122,158	$125,000	$122,158	$125,000	$122,158	$125,000	$122,158	$125,000
Total Indirect Costs	$2,842	$0	$2,842	$0	$2,842	$0	$2,842	$0
Total Costs	$125,000	$125,000	$125,000	$125,000	$125,000	$125,000	$125,000	$125,000

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

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

***FOR REQUESTED FUTURE YEARS:**

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

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

Reference Table 2 of this FOA for a breakdown of the required matching funds for each year.

Appendix B – OVERVIEW OF APPLICATION AND SUBMISSION REQUIREMENTS

I. Application and Submission Requirements

IMPORTANT: SAMHSA's transition to NIH's eRA grants system (eRA Commons) has changed the application registration, submission, and formatting requirements for FOAs. In order to submit an application, you must register in NIH's **eRA (electronic Research Administration) Commons** in addition to the System for Award Management (SAM) and Grants.gov.

Registering in eRA Commons will generate an ID that provides access to the electronic submissions system and allows applicants to retrieve grant information and receive notifications about their application status. Please take the necessary steps to register in eRA Commons before submitting your application. It is strongly recommended that applicants start the registration process six (6) weeks in advance of the application due date.

After you complete and comply with all registration and application requirements, you must submit your application through **1) Grants.gov**. Successfully submitted applications through Grants.gov will then proceed to the **2) NIH eRA Commons system and validations**. Once the application is successfully validated by the NIH eRA Commons system, it will be forwarded to **3) SAMHSA** as the receiving institution for further review.

Please carefully review the application registration and submission information in Section IV of the FOA and refer to Sections III and IV of this appendix for specific instructions.

Carefully read the application download, registration, and submission guidelines and requirements below. You must comply with the following requirements, or your application will be screened out and will not be reviewed:

The requirements for application submission are:

1. GET REGISTERED

Applicants are required to complete **four (4) registration processes:**

1. Dun & Bradstreet Data Universal Numbering System (to obtain a DUNS number);
2. System for Award Management (SAM);
3. Grants.gov; and
4. eRA Commons.

2. DOWNLOAD APPLICATION COMPONENTS

Download the Application Package from Grants.gov. Applicants must complete the **SF-424** document before any other document in the application package, as it populates certain fields on additional forms within the package.

3. WRITE AND COMPLETE APPLICATION

Complete all required documents. Refer to Section IV-1.1, Required Application Components for a full list of required documents. You also must comply with all formatting requirements provided in Section IV-1.2, SAMHSA Formatting Requirements, of this document.

Note: If you are submitting more than one application under the same announcement number, you must ensure that the Project Title in Field 15 of the SF-424 is unique for each submission.

4. SUBMIT APPLICATION

After completing all required documents and complying with all registration and application requirements, you must submit your application through Grants.gov. Successfully submitted applications through Grants.gov will then proceed to the NIH eRA Commons system and validations. Once your submitted application is successfully validated by the NIH eRA Commons system, it will be forwarded to SAMHSA as the receiving institution for further review.

5. AFTER SUBMISSION

You will receive notification that your application was either validated by the Grants.gov system or rejected due to errors. You will have an opportunity to address any errors and resubmit the application. After successfully submitting your application through Grants.gov, your application will go through eRA Commons validations. See Section II-5.4 on how to resubmit your application and address any system or technical issues.

II. HOW TO APPLY

Carefully read the application submission requirements below. You must comply with the following requirements, or your application will be screened out and will not be reviewed. It is strongly recommended that applicants start the registration **process six (6) weeks** in advance of the application due date.

1. GET REGISTERED

Due to SAMHSA's transition to NIH's eRA grants system, SAMHSA has made changes to the application registration requirements (NIH's eRA Commons registration was added to the application process).

Applicants must complete **four (4) registration processes** that are all distinct, one-time registrations in order to submit an application:

1. Dun & Bradstreet Data Universal Numbering System (to obtain a DUNS number);
2. System for Award Management (SAM);
3. Grants.gov; and
4. eRA Commons.

If this is your first time submitting an application, you must complete all four registration processes. If you have already completed registrations for DUNS, SAM, and Grants.gov, you need to ensure that your accounts are still active, and then register for **eRA Commons**. You must register in eRA Commons and receive a Commons ID in order to have access to electronic submission, receive notifications on the status of your application, and retrieve grant information.

Each registration process is described below. It is highly recommended to start all registration processes **at least six (6) weeks** prior to the application submittal date.

1.1 Dun & Bradstreet Data Universal Numbering System (DUNS) Registration

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

1.2 System for Award Management (SAM) Registration

To create a SAM user account, Register/Update entity, and/or Search Records, go to https://www.sam.gov.

It is also highly recommended that applicants renew their accounts prior to the expiration date. **SAM information must be active and up-to-date, and should 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.

If an applicant's SAM account expires, the renewal process requires the same validation with IRS and DoD (Cage Code) as a new account requires. The renewal process can take up to one month. It is highly recommended that applicants renew their accounts prior to the expiration date. The account update process takes only 24-48 hours.

1.3 Grants.gov Registration

Please register to obtain a Grants.gov username and password at http://www.grants.gov/web/grants/register.html.

Grants.gov requires a one-time registration in order to submit applications. While Grants.gov registration is a one-time only registration process, it consists of multiple sub-registration processes (i.e., DUNS number and SAM registrations) before you can submit your application. [Note: eRA Commons registration is separate].

If you have already completed Grants.gov registration and ensured your **Grants.gov and SAM accounts are up-to-date and/or renewed**, please skip this section and focus on the eRA Commons registration steps noted below. If this is your first time submitting an application through Grants.gov, registration information can be found at the Grants.gov "Applicants" tab.

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 SF-424 (first page). See the Organization Registration User Guide for details at the following Grants.gov link: http://www.grants.gov/web/grants/applicants/organization-registration.html.

1.4 eRA Commons Registration

eRA Commons requires a one-time registration, separate from Grants.gov registration. It is strongly recommended to start the eRA Commons registration process **at least six (6) weeks** prior to the application due date. You must register in the eRA Commons and receive a Commons ID in order to have access to electronic submission and retrieval of application/grant information.

If this is your first time registering with eRA Commons, either the Authorized Organization Representative (AOR) from the SF-424 or the Business Official (BO) from the HHS Checklist must complete the online Institution Registration Form. Instructions on how to complete the online Institution Registration Form will be provided on the eRA Commons Online Registration Page.

[**Note**: You must have a DUNS number to complete the eRA Commons registration.]

After you complete the online Institution Registration Form and click Submit, the eRA Commons will send you an e-mail notification from era-notify@mail.nih.gov with the link to confirm your email address. Once your e-mail address is verified, your request will be reviewed and you will be informed of the result via email. If your request is denied, you will receive an email notifying you of the reason for the denial. If your request is approved, you will receive an email with your Commons User ID and temporary password. You will need to log into Commons with the temporary password, and the system will prompt you to change the temporary password to a permanent one. Once your designated contact Signing Official (SO), or either the AOR from the SF-424 or the BO from the HHS Checklist electronically signs your registration request, your organization will be active in Commons and you will be able to create and maintain additional accounts for your organization's staff.

Important: The eRA Commons requires you to identify at least one SO, which can be either the AOR from the SF-424 or the BO from the HHS Checklist, and at least one Program Director/Principal Investigator (PD/PI) account in order to submit an application. The primary SO must create the account for the PD/PI listed as the PD/PI role on the HHS Checklist. Note

that you will need the Commons ID number of the PD/PI to insert in the 'Applicant Identifier' field of the SF-424 document.

You can find additional information about the eRA Commons registration process at https://era.nih.gov/reg_accounts/register_commons.cfm.

2. DOWNLOAD APPLICATION COMPONENTS

You must go to both Grants.gov **and** the SAMHSA website to download the required documents you will need to apply for a SAMHSA grant.

2.1 How to Download the Application Package (Grants.gov)

On the Grants.gov site (http://www.Grants.gov), select the 'Apply for Grants' option from the 'Applicants' Tab at the top of the screen. You will be directed to the 'Apply for Grants' page. Click on the 'Get Application Package' tab located on the right of the Grants.gov 'Apply for Grants' page. You will be directed to the 'Get Application Package Now' page where you will search for the appropriate funding announcement number (called the funding opportunity number) or the Catalogue of Federal Domestic Assistance (CFDA) number. You can find the funding announcement number and CFDA number on the cover page of the accompanying document, FOAPART I: Programmatic Requirements.

For more information on the application download process, go to the Grants.gov 'Apply for Grants' page. Download both the Application Instruction and Application Package on the 'Apply for Grants' page. You can view, print, or save all the forms in the Application Package and then complete them for electronic submission to Grants.gov. Completed forms also can be saved and printed for your records.

2.2 Additional Documents for Submission (SAMHSA Website)

You will find additional materials you will need to complete your application on the SAMHSA website at http://www.samhsa.gov/grants/applying/forms-resources.

3. WRITE AND COMPLETE APPLICATION

After downloading and retrieving the required application components and completing the registration processes, it is time to write and complete your application. With SAMHSA's transition to NIH's eRA grants system, there are **new application formatting requirements and validations.** All files uploaded with the Grants.gov application **MUST** be in Adobe PDF file format.

Applications successfully submitted through Grants.gov will proceed to the NIH's eRA Commons system and undergo a series of validations to ensure all required information is included and in the appropriate format. Once your application is successfully validated by the NIH eRA Commons system, it will be forwarded to SAMHSA as the receiving institution for further review.

Please see Section IV for SAMHSA-specific application formatting requirements, Grants.gov requirements, and the list of **new data formatting requirements and validations for eRA Commons. Applications that do not comply with these requirements will be screened out and will not be reviewed.**

You must complete all required application components and any supporting documents listed in Section IV 1.1of this document. You also must comply with the **formatting requirements and system validations** listed in Section IV.

3.1 Required and Standard Application Components

Applications must include the following required application components listed in the table below. This table consists of a full list of standard application components, a description of each required component, and its source for application submission.

#	*Standard Application Components*	*Description*	*Source*
1	SF-424 (Application for Federal Assistance) Form	This form must be completed by applicants for all SAMHSA grants.	Grants.gov
2	SF-424 A (Budget Information – Non-Construction Programs) Form	Use SF-424A. Fill out Sections B, C, and E of the SF-424A. **You must use the sample budget format in the FOA:Appendix A. This will expedite review of your application.** In preparing the budget, adhere to any existing federal grantor agency guidelines which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program.	Grants.gov
3	HHS Checklist Form	The HHS Checklist ensures that you have obtained the proper signatures, assurances, and certifications**.** You are not required to complete the entire form, but please include the top portion of the form ("**Type of Application**") indicating if this is a new, noncompeting continuation, competing continuation, or supplemental application; the Business Official and Program Director/Project Coordinator contact information (**Part C**); and your organization's nonprofit status (**Part D, if applicable**). All SAMHSA Notices of Award (NoAs) will be emailed by SAMHSA via NIH's eRA Commons to the Institutional Profile File (IPF) organization, Project Director (PD), and Signing Official/Business Official (SO/BO).	Grants.gov
4	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.	Grants.gov
5	Community Overview	The Community Overview is a description of the community you intend to serve. It is your opportunity to educate the peer reviewers about the community so they can understand the context in which the coalition will operate. It is not scored and does not count toward the 25 page limit. It can be no longer than one page in length.	FOA, Section V, 5.1
6	Project Narrative Attachment	The Project Narrative describes your project. The application must address how the applicant will implement and meet the goals and objectives of the program.	Grants.gov/ FOA, Section

		Applicants must attach their project narrative file (Adobe PDF format only) inside the Project Narrative Attachment Form.	V, 5.2
7	Budget Justification and Narrative Attachment	Applicants must include a detailed Budget Narrative in addition to the Budget Form SF-424A. The budget justification and narrative must be submitted as file **BNF** when you submit your application into Grants.gov	Grants.gov
8	SF-424 B (Assurances for Non-Construction) Form	You must read the list of assurances provided on the SAMHSA website and check the box marked 'I Agree' before signing the first page (SF-424) of the application.	SAMHSA Website
9	Disclosure of Lobbying Activities (SF-LLL) Form	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 Congress or state legislatures. You must sign and submit this form, if applicable.	Grants.gov
10	Other Attachments Form	Refer to the Supporting Documents below. Use the Other Attachments Form to attach all required additional/supporting documents listed in the table below.	Grants.gov

Supporting Documents

In addition to the Standard Application Components listed above, the following supporting documents are necessary for the review of your application. Supporting documents must be attached to your application. For each of the following application components, attach each document (Adobe PDF format only) using the Other Attachments Form from the Grants.gov application package.

#	*Supporting Documents*	*Description*	*Source*
1	Certifications	You 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.	SAMHSA Website
2	HHS 690 Form	Every grant applicant must have a completed HHS 690 form (PDF | 291 KB) on file with the Department of Health and Human Services.	SAMHSA Website
3	Charitable Choice Form SMA 170	See Section V- 5,5 of the FOA: , to determine if you are required to submit Charitable Choice Form SMA 170. If you are, you can upload this form to Grants.gov when you submit your application.	SAMHSA Website
4	Key Personnel Resumes, CVs, and Position Descriptions	See Appendix I of this document for additional instructions for completing these sections.	Appendix I of this document.
5	Additional Documents in the FOA:	For DFC, this includes attachments 1 – 13. For more information please review webinar located on the DFC application page.	FOA: Section V-5,5

4. SUBMIT APPLICATION

Electronic Submission (Grants.gov, eRA Commons)

After completing all required registration and application requirements, you must **electronically submit your application** via Grants.gov (http://www.grants.gov) using the standard Grants.gov downloadable Adobe Application Package submission process.

You must prepare your Project Narrative and other attached documents in Adobe PDF format or your application will not be forwarded to eRA Commons and will not be reviewed. Directions for creating PDF files can be found on the Grants.gov website. On-time submission requires that electronic applications be error-free and made available to SAMHSA for processing from the NIH eRA system on or before the application due date and time. Applications must be submitted to and validated successfully by Grants.gov and eRA Commons no later than **11:59 PM** Eastern Time on **March 15, 2017**.

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 the next 24-48 hours. One notification email will confirm receipt of the application in Grants.gov, and the other notification email will indicate that the application was either successfully validated by the system (with a tracking number) or rejected due to errors. It is important that you retain this Grants.gov tracking number. **Receipt of the Grants.gov tracking number is the only indication that Grants.gov has successfully received and validated your application.** If you do not receive a Grants.gov tracking number, you may want to contact the Grants.gov help desk for assistance. **SAMHSA strongly encourages all prospective applicants to sign up for Grants.gov email notifications regarding this FOA. If the FOA is cancelled or modified, individuals who sign up with Grants.gov for updates will be automatically notified.**

All applications that are successfully submitted must be validated by Grants.gov before proceeding to the NIH eRA Commons system and validations. If for some reason your application is not accepted, you will receive a subsequent notice from Grants.gov indicating that the application submission has been rejected.

After applications are submitted to Grants.gov, they will be retrieved by the NIH eRA system and validated. If no errors are found, the application will be assembled in the eRA Commons for viewing by the applicant before moving on for further SAMHSA processing. If there are errors, the applicant will be notified of the problems found in the application. The applicant then must take action to make the required corrections, and re-submit the application through Grants.gov before the application due date and time. If a changed/corrected application is re-submitted after the deadline, the application will be considered late and will not be accepted.

Applicants are responsible for viewing and tracking their applications in the eRA Commons after submission through Grants.gov to ensure accurate and successful submission. You must have an **eRA Commons ID** in order to have access to electronic submission and retrieval of application/grant information. Once you are able to access your application in the eRA Commons, be sure to review it carefully as this is what reviewers will see.

Applicants are strongly encouraged to allocate additional time prior to the submission deadline to submit their applications and to correct errors identified in the validation process. Applicants are encouraged also to check the status of their application submission to determine if the application is complete and error-free.
Applicants who encounter problems when submitting their applications in Grants.gov must attempt to resolve them by contacting the Grants.gov Help Desk at:

By e-mail: support@grants.gov

By phone: (toll-free) 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 receive a case/ticket/reference number that documents the issues/problems with Grants.gov.

Additional support is also available from the NIH eRA Service desk at:

By e-mail: http://grants.nih.gov/support/index.html

By phone: 301-402-7469 or (toll-free) 1-866-504-9552. The NIH eRA Service desk is available Monday – Friday, 7 a.m. to 8 p.m. Eastern Time, excluding federal holidays.

SAMHSA highly recommends that you submit your application 24-72 hours 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 DUNS, SAM, Grants.gov, and eRA Commons registrations, it is highly unlikely that these issues will be resolved in time to successfully submit an electronic application.

After completing your application, you must electronically submit your application through Grants.gov. On-time submission requires that electronic applications be error-free and made available to SAMHSA for processing on or before the application due date and time. Applications must be successfully submitted through Grants.gov and validated by eRA Commons no later than **11:59 PM** Eastern Time on the application due date. SAMHSA recommends submitting your applications early to track and correct any errors.

4.2 Submission Options

There are several ways you can submit you application to SAMHSA through Grants.gov:

1) **ASSIST** – You can use the ASSIST system to prepare, submit, and track your application online. [Note: ASSIST requires an eRA Commons ID to access the system]

2) **Grants.gov Downloadable Forms** – You can download an application package from Grants.gov, complete the forms offline, submit the completed forms to Grants.gov, and track your application in eRA Commons.

3) **Grants.gov Workspace –** You can use the shared, online environment of the Grants.gov Workspace to collaboratively work on different forms within the application package.

The specific actions you need to take to submit your application will vary by submission method as listed above. The steps to submit your application:

Steps to submit to Grants.gov using ASSIST are available at
http://grants.nih.gov/grants/ElectronicReceipt/files/ASSIST-Getting-Started-Single-project.pdf

Steps to submit to Grants.gov using downloadable forms are available at
http://www.grants.gov/web/grants/applicants/apply-for-grants.html

Steps to submit to Grants.gov using the Grants.gov Workspace are available at
http://www.grants.gov/web/grants/applicants/workspace-overview.html

Regardless of the option you use, your application will be subject to the same registration requirements, completed with the same data items, routed through Grants.gov, validated against the same agency business rules, assembled in a consistent format for review consideration, and tracked in eRA Commons.

5. AFTER SUBMISSION

5.1 System Validations and Tracking

After you complete and comply with all registration and application requirements, your application will be validated by Grants.gov. You will receive a notification that your application is being processed. You will receive two additional e-mails from Grants.gov within the next 24-48 hours (one notification email will confirm receipt of the application in Grants.gov, and the other notification email will indicate that the application was either successfully validated by the Grants.gov system or rejected due to errors). Refer to Section IV for more information on Grants.gov Formatting and Validation Requirements. You also will receive an application tracking number in the email notifications. It is important that you retain this Grants.gov tracking number. If you do not receive a Grants.gov tracking number, you may want to contact the Grants.gov Help Desk for assistance (see Appendix C).

If Grants.gov identifies any errors and rejects your application with a "Rejected with Errors" status, you must address all errors and submit again. If no problem is found, Grants.gov will allow the eRA system to retrieve the application and check it against its own agency business rules (eRA Commons Validations).

After you successfully submit your application through Grants.gov, your application will go through eRA Commons validations. You must check your application status in eRA Commons. You must have an eRA Commons ID in order to have access to electronic submission and retrieval of application/grant information.

If no errors are found, the application will be assembled in the eRA Commons for viewing by the applicant, and will be forwarded to SAMHSA as the receiving institution for further review. If errors are found, the applicant will receive a System Error and/or Warning notification regarding the problems found in the application. The applicant must take action to make the required corrections, and re-submit the application through Grants.gov before the application due date and time.

5.2 eRA Commons: Error vs. Warning Notifications

Applicants may receive a System Error and/or Warning notification after submitting an application. Please be aware of the distinction between System Errors and System Warnings.

Warnings – If an applicant receives a Warning notification after the application is submitted, the applicant is not required to resubmit the application. The reason for the Warning will be identified in the notification. It is at the applicant's discretion to choose to resubmit, but if the application was successfully received, it does not require any additional action.

Errors – If an applicant receives an Error notification after the applications is submitted, the applicant must correct and resubmit the application. The word Error is used to characterize any condition which causes the application to be deemed unacceptable for further consideration.

5.3 System or Technical Issues

If you encounter a system error that prevents you from completing the application submission process on time, the BO from your organization will receive an email notification from eRA Commons. SAMHSA highly recommends contacting the eRA Help Desk and submitting a web ticket to document your good faith attempt to submit your application, and determining next steps. See Appendix C for more information on contacting the eRA Help Desk.

5.4 Resubmitting a Changed/Corrected Application

If SAMHSA does not receive your application by the application due date as a result of a failure in the SAM, Grants.gov, or NIH's eRA Commons systems, you must contact the Division of Grant Review within **one business day after the official due date to** dgr.applications@samhsa.hhs.gov and provide the following:

- A case number or email from SAM, Grants.gov, and/or NIH's eRA system that allows SAMHSA to obtain documentation from the respective entity for the cause of the error.

SAMHSA will consider the documentation to determine **if** the applicant followed Grants.gov and NIH's eRA requirements and instructions, met the deadlines for processing paperwork within the recommended time limits, met FOA requirements for submission of electronic applications, and made no errors that caused submission through Grants.gov or NIH's eRA to fail. No exceptions for submission are allowed when user error is involved. Please note that system errors are extremely rare.

[**Note**: When resubmitting an application, please ensure that the **Project Title is identical to the Project Title in the originally submitted application** (i.e., no extra spacing) as the Project Title is a free-text form field.]

III. KEY SYSTEMS IN THE APPLICATION SUBMISSION PROCESS

There are various systems involved in the SAMHSA grant application submission process. Each has its own registration and business rule requirements:

1) **Grants.gov** – Grants.gov is an online portal that allows applicants to search for funding opportunity announcements and submit grant applications via the system. Once applicants submit their applications to Grants.gov, the system validates the applications and forwards them to the appropriate agency (e.g., SAMHSA) for processing and funding consideration.

2) **eRA Commons** – The electronic Research Administration (eRA) Commons is an online interface managed by NIH that allows grant applicants, grantees, and federal staff to securely share, manage, and process grant-related information. Registering in eRA Commons will provide applicants with a Commons ID to access their electronic submissions, retrieve grant information, and receive notifications about their application status. You may also interact with additional systems to complete your registration (e.g., System for Award Management – SAM) or to prepare and submit your application (e.g., ASSIST).

3) **ASSIST** – The Application Submission System & Interface for Submission Tracking (ASSIST) is an NIH sponsored online interface used to prepare applications using the SF424 form set, submit electronically through Grants.gov to SAMHSA and other participating agencies, and track grant applications. Active Grants.gov and eRA Commons credentials are required to prepare and submit applications using ASSIST.

IV. FORMATTING AND SYSTEMS VALIDATION

1. SAMHSA FORMATTING REQUIREMENTS

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. See below for a list of formatting requirements required by SAMHSA:

- Text must be legible. Pages must be typed in black, single-spaced, using a font of Times New Roman 12, with all margins (left, right, top, bottom) at least one inch each. You may use Times New Roman 10 only for charts or tables.

- You must submit your application and all attached documents in Adobe PDF format, or your application will not be forwarded to eRA Commons and will not be reviewed.

- To ensure equity among applications, page limits for the Project Narrative cannot be exceeded.

- Black print should be used throughout your application, including charts and graphs (no color).

- The page limits for Attachments stated in the FOA PART I: Section IV-1, should not be exceeded.

- If you are submitting more than one application under the same announcement number, you must ensure that the Project Title in Field 15 of the SF-424 is unique for each submission.

2. GRANTS.GOV FORMATTING AND VALIDATION REQUIREMENHTS

- Grants.gov allows the following list of UTF-8 characters when naming your attachments: A-Z, a-z, 0-9, underscore, hyphen, space, and period. Other UTF-8 characters should not be used as they will not be accepted by NIH's eRA Commons, as indicated in item #10 in the table below.

- Scanned images must be scanned at 150-200 dpi/ppi resolution and saved as a 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.

- Any files uploaded or attached to the Grants.gov application must be PDF file format and must contain a valid file format extension in the filename. In addition, the use of compressed file formats such as ZIP, RAR or Adobe Portfolio will not be accepted.

3. eRA COMMONS FORMATTING AND VALIDATION REQUIREMENTS

The following table is a list of **formatting requirements and system validations required by eRA Commons.** If you do not adhere to these requirements, you will receive an email notification from **era-notify@mail.nih.gov** to take action and adhere to the requirements so that your application can be processed successfully. It is highly recommended that applicants submit their applications 24-72 hours before the submission deadline to correct errors (if new application data requirements aren't met) and resubmit applications. If you experience any system validation or technical issues after hours on the application due date, please contact the eRA Help Desk and submit a Web ticket to document your good-faith attempt to submit your application (see Appendix C for more Help Desk information).

#	*eRA Validations*	*Action if the Validation is not met*
1	DUNS numbers: The DUNS number provided on any forms must have valid characters (9 or 13 numbers with or without dashes).	If the DUNS number provided has invalid characters (other than 9 or 13 numbers) after stripping of dashes, the BO from your organization will receive the following email message from eRA Commons: "The DUNs number for <insert form name > is not in the valid format of DUNS or DUNS+4 number (DUNS should be 9 or 13 digits; no letters or special characters)."
2	Submit required documentation for the FOA. [Note: We recommend you use the latest package from Grants.gov, which will have the latest forms and templates required.]	If you do not submit the documentation required for the FOA, the BO from your organization will receive the following email message from eRA Commons: "The format of the application does not match the format of the FOA. Please contact the eRA Help Desk for assistance."

3	Check the "Changed/Corrected Application" box in the SF424 form after making changes/corrections to resubmit an application. Refer to Section II-5.4 for more information on resubmission criteria.	If applicants change/correct an error on their application, any subsequent submissions for the same FOA will result in an error, and the BO from your organization will receive the following email message from eRA Commons: "This application has been identified as a duplicate of a previous submission. The 'Type of Submission' should be set to Changed/Corrected if you are addressing errors/warnings."
4	Applications cannot be larger than 1.2GB	If the application exceeds 1.2GB, the BO from your organization will receive the following email message from eRA Commons: "The application did not follow the agency-specific size limit of 1.2 GB. Please resize the application to be no larger than 1.2GB before submitting."
5	The Funding Opportunity Announcement (FOA) number must exist.	If you enter an FOA number that does not exist, the BO from your organization will receive the following email message from eRA Commons: "The Funding Opportunity Announcement number does not exist."
6	All documents and attachments must be in PDF format.	If you submit attachments which are not in PDF format, the BO from your organization will receive the following email message from eRA Commons: "The <attachment> attachment is not in PDF format. All attachments must be provided to the agency in PDF format with a .pdf extension. Help with PDF attachments can be found at http://grants.nih.gov/grants/ElectronicReceipt/pdf_guidelines.htm."
7	All attachments should comply with the following formatting requirement: o PDF attachments cannot be empty (0 bytes).	If you submit attachments which do not comply with the stated formatting requirement, the BO from your organization will receive the following email message from eRA Commons: "The {attachment} attachment was empty. PDF attachments cannot be empty, password protected or encrypted. Please submit a changed/corrected application with the correct PDF attachment. Help with PDF attachments can be found at http://grants.nih.gov/grants/ElectronicReceipt/pdf_guidelines.htm."
8	All attachments should comply with the following formatting requirement: o PDF attachments cannot have Meta data missing, cannot be encrypted, password protected or secured documents.	If you submit attachments which do not comply with the stated formatting requirement, the BO from your organization will receive the following email message from eRA Commons: "The <attachment> attachment contained formatting or features not currently supported by NIH: <condition returned>. Help with PDF attachments can be found at http://grants.nih.gov/grants/ElectronicReceipt/pdf_guidelines.htm."

9	All attachments should comply with the following formatting requirement: ○ Size of PDF attachments cannot be larger than 8.5 x 11 inches (horizontally or vertically). [Note: We recommend limiting the size of attachments to 35 MB.]	If you submit attachments that do not comply with the stated formatting requirement, the BO from your organization will receive the following email message from eRA Commons: "Filename <file> cannot be larger than U.S. standard letter paper size of 8.5 x 11 inches. Please see our PDF guidelines at http://grants.nih.gov/grants/ElectronicReceipt/pdf_guidelines.htm for additional information."
10	All attachments should comply with the following formatting requirement: ○ PDF attachments should have a valid file name. Valid file names must include the following UTF-8 characters: A-Z, a-z, 0-9, underscore (_), hyphen (-), space, period.	If you submit attachments which do not comply with the stated formatting requirement, the BO from your organization will receive the following email message from eRA Commons: "The <attachment> attachment filename is invalid. Valid filenames may only include the following characters: A-Z, a-z, 0-9, underscore (_), hyphen (-), space, or period. No special characters (including brackets) can be part of the filename."
11	Contact person email in the SF424 Section F, must contain a '@', with at least 1 and at most 64 chars preceding and following the '@'. Control characters (ASCII 0 through 31 and 127), spaces and special chars < > ( ) [ ] \ , ; : are not valid.	If the contact person email address does not comply with the stated formatting requirement, the BO from your organization will receive the following email message from eRA Commons: "The submitted e-mail address for the person to be contacted {email address}, is invalid. Must contain a '@', with at least 1 and at most 64 chars preceding and following the '@'. Control characters (ASCII 0 through 31 and 127), spaces and special chars < > ( ) [ ] \ , ; : are not valid."
12	Congressional district code of applicant (after truncating) must be valid. [Note: Applies to form SF424, items 16a and 16b]	If the Congressional district code of the applicant is not valid, the BO from your organization will receive the following email message from eRA Commons: "Congressional district <Congressional District> is invalid. To locate your district, visit http://www.house.gov/"
13	Authorized Representative email must contain a '@', with at least 1 and at most 60chars preceding and following the '@'. Control characters (ASCII 0 through 31 and 127), spaces and special chars < > ( ) [ ] \ , ; : are not valid.	If the Authorized Representative email address does not comply with the stated formatting requirement, the BO from your organization will receive the following email message from eRA Commons: "Must contain a '@', with at least 1 and at most 64 chars preceding and following the '@'. Control characters (ASCII 0 through 31 and 127), spaces and special chars < > ( ) [ ] \ , ; : are not valid. The Person to be contacted email address also provided on the SF 424 will be used instead."

V. ADMINISTRATION INFORMATION

1. AWARD NOTICES

You will receive an email from SAMHSA, via NIH's eRA Commons that describes the general results of the review of your application, including the score that your application received.

If you are approved for funding, a Notice of Award (NoA) will be emailed to the Business Official's email address identified on the HHS Checklist form submitted with the application. The NoA also will be sent to the IPF organization and the D/PI. Hard copies of the NoA will no longer be mailed via postal service. The NoA is the sole obligating document that allows you to receive federal funding for work on the grant project.
If you are not funded, you will receive a notification from SAMHSA, via NIH's eRA Commons.

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 75. For more information see the SAMHSA website at http://www.samhsa.gov/grants/grants-management/policies-regulations/requirements-principles.

Depending on the nature of the specific funding opportunity and/or your proposed project as identified during review, SAMHSA may negotiate additional terms and conditions with you prior to grant award. These may include, for example:

- actions required to be in compliance with confidentiality and participant protection/human subjects requirements;
- requirements relating to additional data collection and reporting;
- requirements relating to participation in a cross-site evaluation;
- requirements to address problems identified in review of the application; or
- revised budget and narrative justification.

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.

Accessibility Provisions for All Grant Application Packages and Funding Opportunity Announcements
Recipients of federal financial assistance (FFA) from HHS must administer their programs in compliance with federal civil rights law. This means that recipients of HHS funds must ensure equal access to their programs without regard to a person's race, color, national origin, disability, age and, in some circumstances, sex and religion. This includes ensuring your programs are accessible to persons with limited English proficiency. HHS provides guidance to recipients of FFA on meeting their legal obligation to take reasonable steps to provide meaningful access to their programs by persons with limited English proficiency. Please see http://www.hhs.gov/civil-rights/for-individuals/section-1557/index.html . The HHS Office for Civil Rights also provides guidance on complying with civil rights laws enforced by HHS. Please see http://www.hhs.gov/ocr/civilrights/understanding/section1557/index.html; and http://www.hhs.gov/ocr/civilrights/understanding/index.html. Recipients of FFA also have

specific legal obligations for serving qualified individuals with disabilities. Please see http://www.hhs.gov/ocr/civilrights/understanding/disability/index.html. Please contact the HHS Office for Civil Rights for more information about obligations and prohibitions under federal civil rights laws at http://www.hhs.gov/ocr/office/about/rgn-hqaddresses.html or call 1-800-368-1019 or TDD 1-800-537-7697. Also note it is an HHS Departmental goal to ensure access to quality, culturally competent care, including long-term services and supports, for vulnerable populations. For further guidance on providing culturally and linguistically appropriate services, recipients should review the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care at http://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53.

- A special term of award may be included in the final NoA that states: "On June 26, 2013, in United States v. Windsor, the Supreme Court held that section 3 of the Defense of Marriage Act (DOMA), which prohibited federal recognition of same-sex marriages, was unconstitutional. As a result of that decision and consistent with HHS policy, SAMHSA recognizes same-sex marriages and same-sex spouses on equal terms with opposite sex-marriages and opposite-sex spouses, regardless of where the couple resides. On June 26, 2015, in Obergefell v. Hodges, the Court held that the Fourteenth Amendment requires a State to license a marriage between two people of the same sex and to recognize a marriage between two people of the same sex when their marriage was lawfully licensed and performed out-of-state. Consistent with both of these decisions, you must treat as valid the marriages of same-sex couples. This policy does not apply to registered domestic partnerships, civil unions or similar formal relationships recognized under state law as something other than a marriage."

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.

- A term may be added to the NoA which states:" Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the HHS awarding agency, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner, in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the awarding agency and to the HHS OIG at the following addresses:

SAMHSA
Attention: Office of Financial Advisory Services
5600 Fishers Lane
Rockville, MD 20857

AND

U.S. Department of Health and Human Services Office of Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator

330 Independence Avenue, SW, Cohen Building
Room 5527
Washington, DC 20201

Fax: (202) 205-0604 (Include "Mandatory Grant Disclosures" in subject line)

or email: MandatoryGranteeDisclosures@oig.hhs.gov

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371 Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 & 376 and 31 U.S.C. 3321)."

- A term may be added to the NoA that states: "In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than $10,000,000, must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a federal award that reached final disposition within the most recent five-year period. The recipient also must make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75."

- A term may be added to the NoA that states: "You as the recipient must comply with drug-free workplace requirements in Subpart B (or Subpart C, if the recipient is an individual) of part 382, which adopts the Government-wide implementation (2 CFR part 182) of section 5152-5158 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701-707)."

Appendix C – Guidance and Help Desk Information (Grants.gov, eRA Commons, and ASSIST)

Grants.gov Help Desk Contacts

If you experience problems downloading forms, you can access the http://www.grants.gov/web/grants/support.html site.

If you encounter Grants.gov registration or submission issues, please contact the Grants.gov Help Desk at:

- By e-mail: support@grants.gov
- By phone: (toll-free) 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.

[**Note**: Make sure you receive a case/ticket/reference number that documents the issues/problems with Grants.gov]

eRA Help Desk Contacts

If you experience system validation or technical issues throughout the application submission process, or after hours on the application due date, refer to the eRA Commons main webpage or contact the **eRA Help desk** to submit a web ticket:

- eRA Help Desk: http://grants.nih.gov/support/
- Telephone: 1-866-504-9552 (toll-free) or 301-402-7469. **Business hours are Monday to Friday from 7am – 8pm Eastern Time.**
- Submitting a Web Ticket: http://grants.nih.gov/support/index.html

ASSIST Help Desk Contacts

If you experience problems accessing or using ASSIST, you can:

- Access the ASSIST Online Help Site at: https://era.nih.gov/erahelp/assist/
- Or contact the eRA Help Desk

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.

Only in these cases may applicants 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 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 DFC application, it will be screened out and returned to you without peer review. See directions for registering in SAM and on Grants.gov above. A written waiver request must be received by SAMHSA **at least 15 calendar days in advance of the application due date** stated on the cover page of this FOA.

The request must be either e-mailed to DGR.Waivers@samhsa.hhs.gov, or mailed to:

Christopher Craft, Director of Grant Review
Office of Financial Resources
Substance Abuse and Mental Health Services Administration
5600 Fishers Lane
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 FOA title and announcement number;
- Name, address, and telephone number of the applicant organization as it 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
- Description of the physical location and how it is not accessible to the Internet.

The Division of Grant Review will either e-mail (if the waiver request was received by e-mail) or express mail/delivery (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. The written approval must be included as the cover page of the paper application and the application must be received by the due date. 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** submit through Grants.gov or forfeit the opportunity to apply. 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 **must** be identical to those numbers provided in any subsequent application.

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

Appendix D – Coalition Involvement Agreements

As **Attachment 1**, applicants **must** include one Coalition Involvement Agreement (CIA) for each coalition sector representative. The following page provides a sample CIA. By signing a CIA, an individual is affirming that he/she represents a specific sector within the coalition. The 12 completed CIAs indicate compliance with the 12 sectors eligibility requirement (see Table 1).

General Information:

- CIAs **must not** be more than 12 months old (March 2016 - March 15, 2017) at the time the application is submitted.
- CIAs **must** be hand-signed and hand-dated. Do **not** use typed/electronic signatures. The same individual **cannot** sign a CIA as both the sector representative and the coalition representative.
- There **must** be one completed CIA for each sector. Do not provide more than 12 CIAs. American Indian and Alaska Native applicants *may include more than 12 CIAs as needed*.
- A coalition sector representative **must not** represent more than one of the 12 sectors. Choose the individual who best represents each of the 12 sectors.
- Paid coalition staff (current or proposed), such as the Program Director and Project Coordinator, and the individual signing as the coalition representative **cannot** serve as a coalition sector representative.

Instructions for Completing the CIA Form

Applicant coalitions have two options for meeting this requirement.

Option 1: If your coalition already has 12 hand-signed and hand-dated agreements with each of the required sectors that are not more than 12 months old, these can be used in lieu of the CIA templates provided in this FOA. Table 19 below **must** be included at the top of each CIA.

Option 2: Use the CIA forms provided below.

Using the headings in the five columns provided below, complete a CIA for each required sector representative. Remove the italicized language and enter the correct information.

Because the CIA is an agreement between the coalition and the selected sector representatives, the applicant should identify the agreed upon responsibilities for both the coalition and the sector representative.

Coalition Involvement Agreement (CIA) Table

This is a template for the CIA Table that **must** be included at the top of each CIA. Fill in the empty cells in the table below and include the completed table in the application with Attachment 1, Coalition Involvement Agreement. **Note**: For the youth sector representative, the member's age **must** be listed.

Table 19:

Sector	Member Name	Organization Name	Rationale for Selection
Insert one for each of the 12 sectors. "State, Local or Tribal Government Agency with Expertise in the Field of Substance Abuse"	Insert Individual's Name Ms. Dee F. Cee	Insert Organization Name County Substance Misuse Prevention Council	Explain Briefly Provides support, training, and guidance to prevention service providers and coalitions in the catchment area of the coalition.

Coalition Involvement Agreement (CIA)

Table 19: CIA Information Table

Sector	Member Name	Organization Name	Rationale for Selection
Youth			*Include age of youth in rationale*
Youth: An individual 18 years of age or younger (must provide age of youth).			

This agreement between [*Coalition name*] and the Youth Representative, [*Name of sector representative*] shall be from [*Month/Date/Year*] until terminated by a mutual accord. This agreement will be reevaluated by both parties on a yearly basis.

NOTE: Any items listed below should be unique to the sector representatives and/or the affiliated organization.

[*Coalition name*] will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of [Coalition name] members to hold their own opinions and beliefs.
8. Other(s), etc.

The Youth Representative, [*Name of sector representative*], will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a ***[ ]*** basis.
6. Participating on at least one subcommittee.
7. Attending coalition sponsored trainings, town hall meetings, and other community events.
8. Contributing to the strategic action planning process.

9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other(s), etc.

Official Coalition Representative's Name	Sector Representative's Name
Official Coalition Representative's Signature	Sector Representative's Signature
_____/___/_____	_____/___/_____
Title Date	Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Coalition Involvement Agreement (CIA)

Table 19: CIA Information Table

Sector	Member Name	Organization Name	Rationale for Selection
Parent			
Parent: **An individual legally responsible for a child, grandchild or foster child.**			

This agreement between [*Coalition name*] and the Parent Representative, [*Name of sector representative*] shall be from [*Month/Date/Year*] until terminated by a mutual accord. This agreement will be reevaluated by both parties on a yearly basis.

NOTE: Any items listed below should be unique to the sector representatives and/or the affiliated organization.

[*Coalition name*] will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of [Coalition name] members to hold their own opinions and beliefs.
8. Other(s), etc.

The Parent Representative, [*Name of sector representative*], will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a ***[ ]*** basis.
6. Participating on at least one subcommittee.

7. Attending coalition sponsored trainings, town hall meetings, and other community events.
8. Contributing to the strategic action planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other(s), etc.

Official Coalition Representative's Name

Official Coalition Representative's Signature

_____/___/_____
Title Date

Sector Representative's Name

Sector Representative's Signature

_____/___/_____
Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Coalition Involvement Agreement (CIA)

Table 19: CIA Information Table

Sector	Member Name	Organization Name	Rationale for Selection
Business			
Business: A representative of a business-related organization.			

This agreement between [*Coalition name*] and the Business Representative, [*Name of sector representative*] shall be from [*Month/Date/Year*] until terminated by a mutual accord. This agreement will be reevaluated by both parties on a yearly basis.

NOTE: Any items listed below should be unique to the sector representatives and/or the affiliated organization.

[*Coalition name*] will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of [Coalition Name] members to hold their own opinions and beliefs.
8. Other(s), etc.

The Business Representative, [*Name of sector representative*], will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a ***[ ]*** basis.
6. Participating on at least one subcommittee.
7. Attending coalition sponsored trainings, town hall meetings, and other community events.

8. Contributing to the strategic action planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other(s), etc.

Official Coalition Representative's Name	Sector Representative's Name
Official Coalition Representative's Signature	Sector Representative's Signature
_____/___/_____	_____/___/_____
Title Date	Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Coalition Involvement Agreement (CIA)

Table 19: CIA Information Table

Sector	Member Name	Organization Name	Rationale for Selection
Media			
Media: A representative of a communication outlet that provides information to the community.			

This agreement between [*Coalition name*] and the Media Representative, [*Name of sector representative*] shall be from [*Month/Date/Year*] until terminated by a mutual accord. This agreement will be reevaluated by both parties on a yearly basis.

NOTE: Any items listed below should be unique to the sector representatives and/or the affiliated organization.

[*Coalition name*] will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of [Coalition name] members to hold their own opinions and beliefs.
8. Other(s), etc.

The Media Representative, [*Name of sector representative*], will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a ***[ ]*** basis.
6. Participating on at least one subcommittee.
7. Attending coalition sponsored trainings, town hall meetings, and other community events.

8. Contributing to the strategic action planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other(s), etc.

Official Coalition Representative's Name Sector Representative's Name

Official Coalition Representative's Signature Sector Representative's Signature

_____/___/_____ _____/___/_____
Title Date Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Coalition Involvement Agreement (CIA)

Table 19: CIA Information Table

Sector	Member Name	Organization Name	Rationale for Selection
School			
School: A representative of the school system with influence in school policies and procedures.			

This agreement between [*Coalition name*] and the School Representative, [*Name of sector representative*] shall be from [*Month/Date/Year*] until terminated by a mutual accord. This agreement will be reevaluated by both parties on a yearly basis.

NOTE: Any items listed below should be unique to the sector representatives and/or the affiliated organization.

[*Coalition name*] will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of [Coalition name] members to hold their own opinions and beliefs.
8. Other(s), etc.

The School Representative, [*Name of sector representative*], will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a ***[ ]*** basis.
6. Participating on at least one subcommittee.
7. Attending coalition sponsored trainings, town hall meetings, and other community events.

8. Contributing to the strategic action planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other(s), etc.

Official Coalition Representative's Name Sector Representative's Name

Official Coalition Representative's Signature Sector Representative's Signature

_____/___/_____ _____/___/_____
Title Date Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Coalition Involvement Agreement (CIA)

Table 19: CIA Information Table

Sector	Member Name	Organization Name	Rationale for Selection
Youth Serving Organization			
Youth Serving Organization: A representative of an organization that provides services to youth.			

This agreement between [*Coalition name*] and the Youth Serving Organization Representative, [*Name of sector representative*] shall be from [*Month/Date/Year*] until terminated by a mutual accord. This agreement will be reevaluated by both parties on a yearly basis.

NOTE: Any items listed below should be unique to the sector representatives and/or the affiliated organization.

[*Coalition name*] will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of [Coalition name] members to hold their own opinions and beliefs.
8. Other(s), etc.

The Youth Serving Organization Representative, [*Name of sector representative*], will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a ***[ ]*** basis.
6. Participating on at least one subcommittee.
7. Attending coalition sponsored trainings, town hall meetings, and other community events.

8. Contributing to the strategic action planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other(s), etc.

Official Coalition Representative's Name Sector Representative's Name

Official Coalition Representative's Signature Sector Representative's Signature

_____/___/_____ _____/___/_____
Title Date Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Coalition Involvement Agreement (CIA)

Table 19: CIA Information Table

Sector	Member Name	Organization Name	Rationale for Selection
Law Enforcement			
Law Enforcement: A representative of a law enforcement agency. The representative <u>must</u> be an active sworn law enforcement officer, not retired.			

This agreement between [*Coalition name*] and the Law Enforcement Representative, [*Name of sector representative*] shall be from [*Month/Date/Year*] until terminated by a mutual accord. This agreement will be reevaluated by both parties on a yearly basis.

NOTE: Any items listed below should be unique to the sector representatives and/or the affiliated organization.

[*Coalition name*] will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of [Coalition name] members to hold their own opinions and beliefs.
8. Other(s), etc.

The Law Enforcement Representative, [*Name of sector representative*], will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a ***[ ]*** basis.
6. Participating on at least one subcommittee.
7. Attending coalition sponsored trainings, town hall meetings, and other community events.

8. Contributing to the strategic action planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other(s), etc.

Official Coalition Representative's Name	Sector Representative's Name
Official Coalition Representative's Signature	Sector Representative's Signature
_____/___/_____	_____/___/_____
Title Date	Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Coalition Involvement Agreement (CIA)

Table 19: CIA Information Table

Sector	Member Name	Organization Name	Rationale for Selection
Civic/Volunteer Organization			
Civic/Volunteer Group: A representative of an organization that provides civic or volunteer activities that serves the community (not a coalition member). Examples include Lions Clubs, Rotary Clubs, etc.			

This agreement between [*Coalition name*] and the Civic/Volunteer Organization Representative, [*Name of sector representative*] shall be from [*Month/Date/Year*] until terminated by a mutual accord. This agreement will be reevaluated by both parties on a yearly basis.

NOTE: Any items listed below should be unique to the sector representatives and/or the affiliated organization.

[*Coalition name*] will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of [Coalition name] members to hold their own opinions and beliefs.
8. Other(s), etc.

The Civic/Volunteer Organization Representative, [*Name of sector representative*], will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a ***[ ]*** basis.
6. Participating on at least one subcommittee.

7. Attending coalition sponsored trainings, town hall meetings, and other community events.
8. Contributing to the strategic action planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other(s), etc.

Official Coalition Representative's Name

Official Coalition Representative's Signature

_____/___/_____
Title Date

Sector Representative's Name

Sector Representative's Signature

_____/___/_____
Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Coalition Involvement Agreement (CIA)

Table 19: CIA Information Table

Sector	Member Name	Organization Name	Rationale for Selection
Religious/Fraternal Organization			
Religious/Fraternal Organization: A representative of a faith-based organization or a representative from a fraternal organization that is based on a common tie or a pursuit of a common object. The organization must have a substantial program of fraternal activities.			

This agreement between [*Coalition name*] and the Religious/Fraternal Organization Representative, [*Name of sector representative*] shall be from [*Month/Date/Year*] until terminated by a mutual accord. This agreement will be reevaluated by both parties on a yearly basis.

NOTE: Any items listed below should be unique to the sector representatives and/or the affiliated organization.

[*Coalition name*] will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of [Coalition name] members to hold their own opinions and beliefs.
8. Other(s), etc.

The Religious/Fraternal Organization Representative, [*Name of sector representative*], will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a ***[ ]*** basis.

6. Participating on at least one subcommittee.
7. Attending coalition sponsored trainings, town hall meetings, and other community events.
8. Contributing to the strategic action planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other(s), etc.

Official Coalition Representative's Name	Sector Representative's Name
Official Coalition Representative's Signature	Sector Representative's Signature
_____/___/_____	_____/___/_____
Title Date	Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Coalition Involvement Agreement (CIA)

Table 19: CIA Information Table

Sector	Member Name	Organization Name	Rationale for Selection
Healthcare Professional			
Healthcare Professional: An individual and/or organization licensed to provide physical, mental, or behavioral healthcare services.			

This agreement between [*Coalition name*] and the Healthcare Professional Representative, [*Name of sector representative*] shall be from [*Month/Date/Year*] until terminated by a mutual accord. This agreement will be reevaluated by both parties on a yearly basis.

NOTE: Any items listed below should be unique to the sector representatives and/or the affiliated organization.

[*Coalition name*] will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of [Coalition name] members to hold their own opinions and beliefs.
8. Other(s), etc.

The *Healthcare Professional Representative*, [*Name of sector representative*], will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a ***[ ]*** basis.

6. Participating on at least one subcommittee.
7. Attending coalition sponsored trainings, town hall meetings, and other community events.
8. Contributing to the strategic action planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other(s), etc.

Official Coalition Representative's Name	Sector Representative's Name
Official Coalition Representative's Signature	Sector Representative's Signature
_____/___/_____	_____/___/_____
Title Date	Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Coalition Involvement Agreement (CIA)

Table 19: CIA Information Table

Sector	Member Name	Organization Name	Rationale for Selection
State/Local/Tribal Government			
State/Local/Tribal Government: A representative of a government-funded agency with a focus on substance abuse.			

This agreement between [*Coalition name*] and the State/Local/Tribal Government Representative, [*Name of sector representative*] shall be from [*Month/Date/Year*] until terminated by a mutual accord. This agreement will be reevaluated by both parties on a yearly basis.

NOTE: Any items listed below should be unique to the sector representatives and/or the affiliated organization.

[*Coalition name*] will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of [Coalition Name] members to hold their own opinions and beliefs.
8. Other(s), etc.

The State/Local/Tribal Government Representative, [*Name of sector representative*], will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a ***[ ]*** basis.

6. Participating on at least one subcommittee.
7. Attending coalition sponsored trainings, town hall meetings, and other community events.
8. Contributing to the strategic action planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other(s), etc.

Official Coalition Representative's Name

Sector Representative's Name

Official Coalition Representative's Signature

Sector Representative's Signature

_____/___/_____
Title Date

_____/___/_____
Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Coalition Involvement Agreement (CIA)

Table 19: CIA Information Table

Sector	Member Name	Organization Name	Rationale for Selection
Other Organization Involved in Reducing Substance Abuse			
Other Organization Involved in Reducing Substance Abuse: A representative of a community organization that addresses substance abuse.			

This agreement between [*Coalition name*] and the Other Organization Involved in Reducing Substance Abuse Representative, [*Name of sector representative*] shall be from [*Month/Date/Year*] until terminated by a mutual accord. This agreement will be reevaluated by both parties on a yearly basis.

NOTE: Any items listed below should be unique to the sector representatives and/or the affiliated organization.

[*Coalition name*] will be responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan which includes volunteer membership and resources, both financial and material.
7. Respecting the rights of [Coalition name] members to hold their own opinions and beliefs.
8. Other(s), etc.

The Other Organization Involved in Reducing Substance Abuse Representative, [*Name of sector representative*], will be responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a ***[ ]*** basis.
6. Participating on at least one subcommittee.

7. Attending coalition sponsored trainings, town hall meetings, and other community events.
8. Contributing to the strategic action planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other(s), etc.

Official Coalition Representative's Name

Sector Representative's Name

Official Coalition Representative's Signature

Sector Representative's Signature

_____/___/_____
Title Date

_____/___/_____
Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Appendix E – Assurance of Legal Eligibility

As Attachment 4, attach either Appendix E or Appendix F. If the coalition is applying for this grant on its own behalf (as the Legal Applicant eligible to receive Federal funding), use Appendix E. If the coalition is partnering with an outside agency as its grant award recipient/legal applicant (Ineligible to receive Federal funding on its own), use Appendix F.

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

1. Is the coalition serving as its own legal grant award recipient? Yes [ ] No [ ]

2. Is the coalition's name listed in Item #8 on the SF-424 of this application? Yes [ ] No [ ]

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

PLEASE NOTE: Although your coalition may exist within another organization that is eligible to receive Federal funding, a Memorandum of Understanding may still be required. If the coalition's name does not appear on Line #8 of the submitted SF-424 with the corresponding Employer/Taxpayer Identification Number (EIN/TIN), then a Memorandum of Understanding **must** be submitted as part of the coalition's application. Not doing so, will deem your application statutorily ineligible and will not move forward to peer review.

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

Statement of Legal Eligibility

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

Official Coalition Representative's Name

Official Coalition Representative's Signature

_____/ /___
Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Appendix F – Memorandum of Understanding between Grant Award Recipient and Coalition

As Attachment 4, attach either Appendix E or Appendix F. Use Appendix E if the coalition is applying for this grant on its own behalf. Use Appendix F if the coalition is partnering with an outside agency as its grant award recipient/legal applicant. The outside agency cannot be a currently funded DFC grant recipient. The signatures on the Memorandum of Understanding (MOU) **must** include that of the grant recipient/legal applicant and the coalition. The date **must** not be older than 12 months at the time of application. A sample MOU is provided on the following page. The MOU submitted in the application should reflect the working relationship between the grant recipient/legal applicant and the coalition. Below are considerations when developing a relationship with an outside partnering agency serving as the grant recipient/legal applicant on behalf of a community coalition:

1. Through the Drug-Free Communities Act of 1997, it is the intent of Congress to fund the work of community coalitions addressing youth substance use. While it is allowable for the recipient to retain a portion for administration of the DFC grant, DFC funds are not meant to substantially supplement the budget of a partnering agency. DFC funds are specifically intended to support the work of the community-based coalition.
2. It is the intent of the DFC Support Program that a coalition's volunteer leadership **has a management role in all financial decisions related to a DFC grant** applied for on their behalf by a partnering organization.
3. The recipient and coalition may want to seek professional guidance such as an attorney and/or accountant when entering into such an agreement. Both the recipient and coalition should be fully aware of and understand the commitment in which they plan to enter.

Accounting Requirements

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

For further assistance on understanding issues regarding the grant recipient's role, responsibilities, or expectations, contact SAMHSA's Division of Grants Management at 240-276-1400.

Sample Memorandum of Understanding between Grant Award Recipient/Legal Applicant and Coalition Sample

This agreement between [Grant Award Recipient/Legal Applicant] and [Coalition name] shall be from [Month/Date/Year] until terminated by mutual agreement:

RESPONSIBILITIES OF THE COALITION:

a. Set policy for and oversee its own programs including goals and objectives in alignment with the DFC Support Program's Terms and Conditions.

b. Participate, advise, and/or direct staff and volunteers, set goals and objectives for contract employees, and negotiate and make recommendations for contracts in collaboration with the grant recipient/legal applicant.

c. Create, approve, and partner in the management of the DFC budget in compliance with grant requirements.

d. Provide copies of all required documentation to the grant recipient/legal applicant as requested.

e. Reimburse grant recipient/legal applicant for any indirect or direct expenses incurred by the coalition with prior approval.

f. Be solely responsible for liabilities arising out of its program and its interaction with program participants.

g. Other…

RESPONSIBILITIES OF THE LEGAL APPLICANT/GRANT RECIPIENT:

a. Provide the coalition staff with office space.

b. Compile financial reports on a mutually agreed upon schedule and provide to coalition.

c. Provide accounting services to prepare and distribute payroll, pay invoices, prepare and submit the appropriate forms for employment, wages and payroll taxes on behalf of the coalition.

d. Negotiate and/or bid and approve contracts in collaboration with the coalition.

e. Maintain all records pertaining to costs and expenses to reflect costs of labor, materials, equipment, supplies, services, and other costs and expenses when reimbursement is claimed or payment is made and share such information with the coalition.

f. Obtain Workman's Compensation Insurance and liability coverage for the coalition's employees.

g. Other…

[Grant Award Recipient/Legal Applicant] and [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 grant activities.

Official Coalition Representative's Name	Grant Award Recipient/Legal Applicant's Name
Official Coalition Representative's Signature	Grant Award Recipient/Legal Applicant's Signature
_____/ /___	_____ __/__/___
Title Date	Title Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Appendix G – Assurance of One DFC Grant at a Time

As Attachment 6, the grant recipient/legal applicant should read the statement below and sign and date this document to assure that it will not hold more than one DFC grant at any time during the FY 2017-2022 funding cycle.

NOTE: DFC Mentoring and STOP ACT grants are in a separate category and do not apply to this assurance.

Applicant Assurance of One DFC at a Time

I attest that the [***Legal Applicant/Grant Recipient***] will be in receipt of only one DFC grant during the 2017-2022 funding cycle.

Authorized Official's Name for the
Legal Applicant/Grant Recipient

Authorized Official's Signature for
the Legal Applicant/Grant Recipient

Title

Organization/Agency

Date

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

Appendix H – Assurance of DFC 10-Year Funding Limit

Under the DFC Act, a coalition **may not** receive more than 10-years of DFC funding. A legal applicant/grant recipient may receive DFC funds on behalf of a coalition if that coalition has not received a full 10 years of funding.

Attachment 7 requires the legal applicant/grant recipient and the Official Coalition Representative (i.e. Key Personnel, Executive Board Member) to read, sign, and date this document to assure the coalition has not already received **10-years** of DFC funding. Under all situations, a coalition **may not** receive more than 10 years of DFC funding.

Specific restrictions on DFC legal applicant/grant award recipients and coalitions are outlined below.

I. Restrictions on legal applicant/grant award recipients:

1. A legal applicant/grant recipient may be the grant recipient agency for only one DFC coalition at a time.
2. An organization serving as the legal applicant/grant recipient **may not** receive DFC funds on behalf of a coalition that has had 10 years of DFC funding.
3. A legal applicant/grant recipient that has already received 10-years of DFC funding may apply for DFC funds on behalf of a coalition that has had less than 10 years of funding.
4. A legal applicant/grant recipient that has already received 10-years of DFC grant funding on behalf of a coalition may apply for DFC funds on behalf of any coalition that is considered to be "new" that is unique and distinct from a coalition that has already received 10-years of DFC funding.

II. Restrictions on 501(c)(3) coalitions:

1. A coalition that is its own legal applicant/grant recipient (i.e. 501(c)(3)) may receive no more than 10-years of DFC funding. A coalition that has received 10-years of DFC funding (through one or more legal applicant/grant award recipients) may not receive further DFC funding.
2. In order to apply for DFC funding a coalition must prove that it is a completely different coalition (from the one previously funded with DFC grant funds). It **must** provide evidence within the application, to the satisfaction of the DFC grant review officials, that it is in fact new, unique, and distinct from any previously DFC funded coalition.
   New coalition factors include:
   a. The proposed new, unique, and distinct coalition **must** be made up of different leadership and sector representatives from the community.
   b. The proposed new, unique, and distinct coalition **must** have a different 12-Month Action Plan responding to a newly identified community needs assessment.
   c. The proposed new, unique, and distinct coalition **must** have a new name and mission statement.

d. 12-Month Action Plan from the originally funded coalition **<u>may not</u>** be repurposed, reorganized, and/or renamed in order to receive funds through the DFC Program as a new, unique, and distinct coalition.

2. If additional information is indicated to determine your coalition status as a new, unique, and distinct coalition, the Business Official will be notified that additional information will be required.

<u>All applications will be thoroughly reviewed to ensure compliance with the 10-Year Funding Limit. It is important that all applicants understand that providing false or misleading information is unlawful and subject to criminal penalties, 18 USC1001.</u>

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

Name of Authorized Official of Legal Applicant/Grant Recipient	Name of Official Coalition Representative
Signature of Authorized Official Legal Applicant/Grant Recipient	Signature of Official Coalition Representative
Title	Title
Organization/Agency	Organization/Agency
Date	Date

<u>NOTE:</u> All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review.

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Appendix I – Key Personnel Resumes, CV's, and Position 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 (key personnel). If key personnel has been selected but not yet hired, include a position description and a letter of commitment from that individual along with a resume. If no individual has been identified, a position description is still required, along with a brief hiring plan and related timeframe.

In lieu of a resume, existing curricula vitae of project staff members may be used if they are updated and contain all items of information requested 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 Program Director/Project Coordinator (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.]

Position Description

1. Title of position (Program Director and Project Coordinator)
2. Description of duties and responsibilities
3. Qualifications required for the position
4. Supervisory requirements, if indicated
5. Skills and knowledge required for the position
6. Amount of travel
7. Salary range
8. Full time/part time/monthly/weekly (hours per day)

Appendix J – General Applicant Information

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

Table 20: General Applicant Information

Information Required	Response
1. Legal Applicant/Grant Recipient Name (Item 8 on SF-424)	
2. Applicant Coalition Name (Item 15 of SF-424; if same as Grant Applicant Name, skip to question 3)	
3. Program Director Name, Phone Number, and Email Address (individual who provides daily oversight of the grant, including fiscal and personnel management, community relations, implementation, and evaluation)	
4. Project Coordinator Name, Phone Number and Email Address (individual who coordinates the work of the coalition and DFC activities, including training, coalition communication, data collection, and information dissemination)	
5. Coalition Physical Mailing Address **(No P.O. Boxes)**	
6. Provide month, date, and year coalition was established (xx/xx/xxxx)	
7. How long has the coalition been formally active? (i.e., 2 Years 1 month)	
8. Legal Applicant/Grant Recipient Name, Phone Number, and Email Address (the person legally charged with the programmatic and fiscal oversight grant) (e.g., Business Official or Authorized Representative)	
9. Grant Award Recipient/Legal Applicant Physical Mailing Address **(No P.O. Boxes)**	
10. List Federal Congressional Districts served by coalition. Go to http://www.house.gov for more information. (Item 16 on SF-424)	
11. Geographical boundaries served by the coalition (e.g., city, county, streets, township, pueblo, reservations, villages, etc.)	
12. List all zip codes served by the coalition. Go to: https://tools.usps.com/go/ZipLookupAction!input.action	
13. Approximate total population served by the coalition	

Information Required	Response
14. Total number of students in grades 6-12 in schools/districts served by coalition.	
15. Coalition **must** identify service area as "rural", "urban", and "suburban" (see Appendix Q). **Applicants must choose only one response.**	
16. Coalition **must** identify if the service area is "Economically Disadvantaged" (see Appendix Q). Indicate yes or no.	
17. Does the coalition serve a federally recognized tribal area? Indicate yes or no. If yes, applicant **must** provide the name of tribe.	
18. Does the coalition have representation that includes at least one representative of the Bureau of Indian Affairs, the Indian Health Service, or a tribal government agency with expertise in the field of substance abuse? Indicate yes or no. If yes, applicant **must** identify the representative's name and organizational entity.	
19. Provide the contact information for the proposed evaluator, if applicable, for the DFC grant. Applicant **must** include name, phone number, and e-mail address.	
20. Is the applicant a religious or faith-based organization? Indicate yes or no.	
21. Has the applicant coalition been mentored through DFC's Mentoring Grant Program? Indicate yes or no. If yes, provide Mentoring Grant's Award Number (SPO-xxxxx).	
22. Provide the date you registered the applicant in the SAM. **Note**: **Failure to have an active registration will make your application ineligible.**	

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

States with SPOCs

As **Attachment 10**, read this section and determine if this is a requirement for your state. This grant program is covered under Executive Order (EO) 12372, as implemented through Department of Health and Human Services (DHHS) regulation at 45 CFR Part 100. Under this Order, states may design their own processes for reviewing and commenting on proposed federal assistance under covered programs. Certain jurisdictions have elected to participate in the EO process and have established State Single Points of Contact (SPOCs). A current listing of SPOCs 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 are not required 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: Christopher Craft, Director of Grant Review, Office of Financial Resources, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane 17E06, Rockville, MD 20857. ATTN: SPOC – Funding Announcement No. SP-17-001.

States without SPOCs

If your state does not have a SPOC and you are a community-based, non-governmental service provider, you **must** submit a Public Health System Impact Statement (PHSIS)[2] 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

[2] 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).

proposed health services grant applications submitted by community-based, non-governmental organizations within their jurisdictions. If you are a state or local government or American Indian/Alaska Native tribe or tribal organization, you are not subject to these requirements.

The PHSIS consists of the following information:

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

For SAMHSA grants, the appropriate state agencies are the Single State Agencies (SSAs) for substance abuse. A listing of the SSAs for substance abuse 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.

You **must** include a copy of a letter transmitting the PHSIS to the SSA in Attachment 10, "Letter to the SSA." The letter **must** notify the state that if it wishes to comment on the proposal, its comments should be sent no later than 60 days after the application deadline to the following address. For United States Postal Service: Christopher Craft, Director of Grant Review, Office of Financial Resources, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, 17E06, Rockville, MD 20857. ATTN: SSA – Funding Announcement No. SP-17-001.

In addition:

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

Appendix L – Disclosure of All Prior DFC Funding

As **Attachment 11**, indicate the status of the grant award recipient/legal applicant coalition or noncoalition entity by completing both the checklist and the table below. At the bottom sign and date the form. **Do not include information about STOP Act or DFC Mentoring grants on this form**. Indicate your status with respect to DFC funds by checking the appropriate box below.

Coalition:

[ ] Coalition has had no prior DFC funding
[ ] Coalition applicant formerly funded through DFC

Legal applicant/grant recipient:

[ ] Legal applicant/grant recipient for a coalition that has had no prior DFC funding
[ ] Legal applicant/grant recipient for a coalition(s) funded through DFC for_____years

List in the table below all of the DFC funding ever received. Add as many rows as needed to include all required information.

Table 21: Disclosure of All Prior DFC Funding

Fiscal Year of Funding	**DFC Award Number(s)** ***(for current and all previous years)***	**Legal Applicant/ Grant Award Recipient**	**Coalition Name**	**Names of Key Personnel (Program Director and Project Coordinator)**

By signing below, I attest that ***[organizational applicant name]*** is applying for Year ***[enter year number]*** of DFC funding. I also attest that the information provided in the above table is true and correct.

NOTE: All forms cannot be more than 12 months old (March 2016 – March 15, 2017) at the time of application and require handwritten signatures and dates or they will be screened out and not move forward to peer review. Providing false or misleading information is unlawful and subject to criminal penalties, 18 USC1001.

Authorized Official for
Legal Applicant/Grant Recipient (Print)

Official Coalition Representative (Print)

Authorized Official Signature for
Legal Applicant/Grant Recipient

Signature for Official Coalition Representative

Title	Title
Organization/Agency	Organization/Agency
Date	Date

Appendix M – DFC National Cross-Site Evaluation Requirements

As Attachment 12, the legal applicant/grant recipient and/or official coalition representative **must** indicate the coalition's ability to meet the DFC National Cross-Site Evaluation requirements by completing Table 23 below.

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

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

Each of the above core measures **must** be collected and reported **every two years**, in at **least three grades** between grades 6th-12th and on **four substances** (alcohol, tobacco, marijuana, and prescription drugs). It is strongly recommended that data be collected in both middle school grade(s) and in high school grade(s). Grant award recipients are allowed to collect additional data as they see fit to meet their local and coalition evaluation needs.

Table 22: DFC National Cross-Site Evaluation Requirements

Questions	Answer
Name of the primary survey instrument to be used to collect data required to obtain the four core measures: 1. Past 30-day use 2. Perception of risk or harm of use 3. Perception of parental disapproval of use 4. Perception of peer disapproval of use	
How often/when will the survey(s) be administered and collected?	
What, if any, supplemental survey(s) instrument and/or data will be used to meet the DFC National Cross-Site Evaluation requirements?	
On what date was the data collected to answer Question 2 of the Project Narrative?	

Appendix N – Sample Congressional Notification

As Attachment 13, applicants **must** follow the exact format below and include the completed Congressional Notification. The Project Description for the Congressional Notification **must not** exceed 35 lines nor exceed more than one page. If the application is funded this information will be shared with members of Congress and the media, and may be posted to the DFC website.

Grant Award SPO# (if applicable)
Coalition Name:
Grant Recipient Organization:
Coalition Community:
Grant Recipient Contact Name:
Grant Recipient Contact Mailing Address:
Grant Recipient Contact E-Mail Address:
Grant Recipient Contact Phone:

Coalition Contact Name:
Coalition Contact Mailing Address:
Coalition Contact E-Mail Address:
Coalition Contact Phone:

[Name of State]
Serving Federal Congressional District(s): **[ ]**
Coalition Located in Federal Congressional District: **[ ]**

Project Description

The [*Coalition Name*] was awarded a FY 2017 Drug-Free Communities Support Program grant in the amount of $ [fill in amount requested] by the White House Office of National Drug Control Policy, in cooperation with the Substance Abuse and Mental Health Services Administration. The Coalition serves [*Community/Town*], [*State*], a community of [*total population*]. The goals of the coalition are to establish and strengthen community collaboration in support of local efforts to prevent youth substance use. The coalition will achieve its goals by implementing these strategies [*Provide a one-sentence description on your strategies. Coalitions may also provide a description of special efforts, initiatives, and/or approaches (i.e. drugged driving, opioid prevention, etc.)]:*

Appendix O – Pre-Submission Verification Checklist

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

Table 23: Pre-Submission Verification

Items to Complete	"X" if Completed
Did you complete and sign the Application for Federal Assistance Form (SF-424)?	
Did you complete Sections B, C, and E of the Non-Construction Budget Worksheet (SF-424A)?	
Did you include a Table of Contents and number it page 1?	
Did you include a Community Overview after the Table of Contents (page 2)?	
Is your Project Narrative (scored section) no longer than **25 pages**?	
Does your Project Narrative address all **5** FY 2017 FOA questions in Section 5.2?	
Did you include the 12 Month Action Plan per Section 5.3.3)?	
Is a one-year Budget Narrative and future years funding table included?	
Did you include a lease agreement and floor plan for proposed cost for Rent, if applicable?	
Did you include an Indirect Cost Rate Agreement for proposed indirect cost, if applicable?	
Did you demonstrate that your coalition will meet the matching fund requirements (Budget Narrative, SF-424, and SF-424A)?	
Did you meet all Statutory Eligibility Requirements (see Table 1 of this FOA)?	
In Attachment 1, did you include one completed CIA for **each** of the 12 sector members (see Appendix D; including Table 19 on each CIA)?	
In Attachment 2, did you provide two sets of coalition meeting minutes that took place between March 2016 and March 2017?	
In Attachment 3, did you include the coalition's Mission Statement?	

Items to Complete	"X" if Completed
In Attachment 4, did you include an Assurance of Legal Eligibility or a Memorandum of Understanding between Grant Award Recipients/Legal Applicant and Coalition (see Appendix E or Appendix F)?	
In Attachment 5, did you include Letter(s) of Mutual Cooperation, with other coalition(s) that are serving a same zip code or partial zip code area as the applicant coalition or a statement that there is no overlap?	
In Attachment 6, did you include the Assurance of One DFC Grant at a Time (see Appendix G)?	
In Attachment 7, did you include Assurance of DFC 10-Year Funding Limit (see Appendix H)?	
In Attachment 8, did you include the required Program Director and Project Coordinator Resumes, CV's and Position Descriptions (see Appendix I)?	
In Attachment 9, did you include the completed General Applicant Information Table 21 (see Appendix J)?	
In Attachment 10, did you include a copy of the letter to the SSA (see Appendix K)?	
In Attachment 11, did you include the Disclosure of All Prior DFC Funding (see Appendix L)?	
In Attachment 12, did you include the DFC National Cross-Site Evaluation Requirements form (see Appendix M)?	
In Attachment 13, did you include the Congressional Notification (see Appendix N)?	
Did you include the Certifications and other forms, i.e., HHS690 & SMA170, etc.	
Did you include the Checklist found in the Grant Application Package as the next-to-last page of the application?	
Is this completed Pre-Submission Verification Checklist the last page of the application (see Appendix O)?	

Appendix P – Application Scoring Criteria

Applications will be screened jointly by ONDCP and SAMHSA to determine whether they meet all Statutory Eligibility Requirements as outlined in this FOA. Applications that meet all Statutory Eligibility Requirements will then be peer reviewed and scored by an Independent Review Group (IRG).

The IRG will score **each element** for questions 5.3.1, 5.3.2, 5.3.4, and 5.3.5 (in Section V) using the following criteria and definitions of each descriptor. In the event an applicant cannot respond to a specific letter, the applicant **must** explain why they are unable to respond and offer a possible solution. The Project Narrative will be scored by how well each of the element is answered.

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

Very Good: The applicant organization provides significant descriptions and relevant and related details in addressing the element but the response is not entirely comprehensive. The applicant organization demonstrates a sound understanding of the topic and includes pertinent examples. It is possible to distinguish 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 element. The applicant organization does not include significant detail or pertinent information. Key details and examples are limited. The applicant organization minimally translates the requirements of the FOA into practice.

Marginal: The applicant organization provides insufficient information, details and/or descriptions that do not completely answer the element. The applicant may have answered part of the element but missed a key point and/or there are major gaps in the information presented.

Unacceptable: The applicant organization does not address the element. The applicant organization states the question, but does not elaborate on the response. The applicant merely repeats information included in the FOA. The applicant organization skips or otherwise ignores the question or includes irrelevant information that does not answer the question.

The IRG will provide an **overall rating** for question 5.3.3, the 12-Month Action Plan, using the following definitions of each descriptor:

Outstanding: The 12-Month Action Plan **fully** addresses both DFC goals. It includes measurable objectives that coincide with problems identified in the data provided in Question 2

of the Project Narrative. The strategies and activities included must be comprehensive and unique to the population to be served. The 12-Month Action Plan's strategies and activities must correspond to the accomplishment of each objective. The 12-Month Action Plan fully meets all four of the following requirements:

1. The template provided in Table 4 is used;
2. The two DFC goals are included (Goal One: Increase community collaboration and Goal Two: Reduce youth substance use);
3. The objectives are measurable and **must** include the following elements:
   - the type of change;
   - how much change will occur, including the specific amount of increase or decrease;
   - the specific population to be addressed (if population is youth, the ages of youth or grade level **are** identified);
   - a specific date (Month/Year) by when change will be accomplished; and
   - indicates how change will be measured.
4. At least two named substances are addressed.

Example of a measurable objective: By 9/29/18 (specific date) increase by 5% (amount of change) perception of peer disapproval of alcohol use (type of change) among 8th, 10th, and 12th grade students (population to be addressed) as determined by a youth survey result (how change will be measured).

Very Good: The 12-Month Action Plan **addresses** the two DFC goals; however, it may not be fully comprehensive or completely correspond with the strategies and activities related to each objective. The 12-Month Action Plan meets **the majority** of the following requirements:

1. The template provided in Table 4 is used;
2. The two DFC goals are included (Goal One: Increase community collaboration and Goal Two: Reduce youth substance use);
3. The objectives are measurable and **must** include the following elements:
   - the type of change;
   - how much change will occur, including the specific amount of increase or decrease;
   - the specific population to be addressed (if population is youth, the ages of youth or grade level **are** identified);
   - a specific date (Month/Year) by when change will be accomplished; and
   - indicates how change will be measured.
4. At least two named substances are addressed.

Acceptable: The 12-Month Action Plan **addresses the two DFC goals.** It may not fully correspond with the strategies and activities to allow all objectives to be met. **Not all** of the

objective elements are included and/or measurable. The 12-Month Action Plan satisfactorily meets the following requirements:

1. The template provided in Table 4 is used;
2. The two DFC goals are included (Goal One: Increase community collaboration and Goal Two: Reduce youth substance use);
3. The objectives are measurable and **must** include the following elements:
   - the type of change;
   - how much change will occur, including the specific amount of increase or decrease;
   - the specific population to be addressed (if population is youth, the ages of youth or grade level **are** identified);
   - a specific date (Month/Year) by when change will be accomplished; and
   - indicates how change will be measured.
4. At least two named substances are addressed.

Marginal: The 12-Month Action Plan **inadequately addresses the two DFC goals.** It insufficiently addresses the strategies and activities related to each objective. The strategies and activities are deficient and may not allow the objectives to be met. **Few** objective elements are included and/or measurable.

Unacceptable: The 12-Month Action Plan **does not address the two DFC goals.** It lacks or fails to document or address the criteria required for the 12-Month Action Plan. The strategies and activities do not correspond to the objectives. Additionally, strategies and activities do not allow objectives to be met. Objectives are **not** measurable and fail to address the four elements discussed above. The required template is not used.

Point scale ranges are provided below and are in order from Question 1 to Question 5:

Question 1 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

Question 2 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

Question 3 (12-Month Action Plan) will be scored using the following 30 point scale:

Outstanding point range:	Very Good point range:	Acceptable point range:	Marginal point range:	Unacceptable point range:
30-27	26-24	23-21	20-18	17-0

Question 4 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 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

Appendix Q – Glossary of Terms

Activities: Efforts, actions or initiatives 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 and 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, including the fiduciary authority/responsibility.

Business Official: The individual identified in the application as being the primary party responsible for overseeing the financial aspects of the grant (i.e. Authorized Representative/Official, Accountant, Bookkeeper). This is the individual who will receive the Notice of Grant Award (NoA) if funded and/or the IRG Summary Statement.

Coalition Involvement Agreement (CIA): A signed mutual agreement between the coalition and each one of its 12 sector members establishing the minimum expectations and contributions to be leveraged on behalf of the community, the coalition and the implementation of the DFC grant.

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

Congressional District: An electoral division of a state entitled to send one member to the US House of Representatives – this refers to the Federal Congressional District.

Community Readiness: The degree to which a community is prepared to take action on an issue.

DFC Grant Award Recipient: The grant award recipient is the organizational entity that receives the DFC grant funds. For the purposes of this FOA, it is either a coalition that is a legally eligible entity (to receive federal funds) or an agency that has agreed to partner (receive the DFC grant) on behalf of the coalition and serve as the legal applicant if awarded the grant.

DFC *Me*: DFC's Management and Evaluation system used for grant communications, progress reporting, and as a learning center for grant award recipients.

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.

Objectives: What is to be accomplished during a specific period of time to move toward achievement of a goal. Measureable objectives **must** include the following elements:

- the type of change;
- how much change will occur, including the specific amount of increase or decrease;
- the specific population to be addressed (if population is youth, the ages of youth or grade level **are** identified);
- a specific date (Month/Year) by when change will be accomplished; and
- indicates how change will be measured.

Example of a measurable objective: By 9/29/18 (specific date) increase by 5% (amount of change) perception of peer disapproval of alcohol use (type of change) among 8th, 10th, and 12th grade students (population to be addressed) as determined by a youth survey result (how change will be measured).

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.

Social Indicator Data: Numerical measures that describe the well-being of individuals or communities. Indicators are comprised of one variable or several components combined into an index. They are used to describe and evaluate community well-being in terms of social, economic, and psychological welfare. Community-level social indicators can be useful in community assessments for different purposes. An assessment to identify community issues and problems, for instance, might rely on such indicators as the incidence of a disease or medical condition either in the community at large, or in a particular social, ethnic, or geographic group. For example, in the substance use world, alcohol-related motor vehicle accidents can speak volumes about the community's alcohol use problem. Even something as seemingly harmless as the sales figures for alcohol may highlight a problem.

Strategy: An overarching strategic plan, action, initiative or policy approach designed to achieve a key or primary aim or objective the coalition intends to 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.