DAC Community Grant - Application FY22

Please visit $\underline{\text{https://www.dacac.org/dac-community-grants (https://www.dacac.org/dac-community-grants)}$ for more details and instructions regarding grants.

Please contact DAC with any questions regarding this application.

1 110110. (200) 122 0 112	Phone:	(260)	422-8412
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quired	
ame of Program: *	
ame of Agency/Organization Submitting Proposal: *	
roject Director: *	
tle: *	

5.	5. Name of Authorized Official (CEO/ED) *							
6.	6. Address (with City, State, and Zip): *							
7.	Phone: *							
8.	Fax: *							

9.	Email: *						
10.	Which of the following does your agency fall under? *						
	501(c)3 Nonprofit Status operating in Allen County, IN						
	O Incorporated entity doing business in Allen County, IN						
	Governmental unit of Allen County, IN						
	Non-incorporated organization teamed with a non-profit or governmental agency operating in Allen County, IN that has agreed to serve as applicant organization's fiscal and administrative agent						
11.	Description of Organization: *						

LZ.	Age	ency Mission: *
13.	Typ	pe of Project: *
	\bigcirc	Education/Prevention: Programs aimed at preventing alcohol abuse and other drug use in groups who are not currently using alcohol and/or other drugs.
	\bigcirc	Intervention/Treatment: Programs focusing on methods of intervention and/or treatment in groups of people using or abusing alcohol and/or other drugs or at a significant known risk of use.
	\bigcirc	Law Enforcement/Judicial: Programs addressing methods to increase efforts in law enforcement and/or criminal justice aimed at reducing alcohol and other drug use.
	\bigcirc	Not Sure
	\bigcirc	Other

	Problem Statement #1: Youth are at low protection for School Rewards for Prosocial Involvement compared to their peers across the nation.					
	Problem Statement #2: Youth struggle with feelings of sadness, hopelessness, or suicidal ideation.					
	Problem Statement #3: Attention, emphasis, and media coverage is focused on antisocial behaviors and negative aspects of youth and their actions.					
	Problem Statement #4: Alcohol use and abuse by youth is a problem within the county.					
	Problem Statement #5: Youth within the county have a low perception of the risks of substance abuse.					
	Problem Statement #6: Youth in the county report a higher than average favorable attitude towards substance use.					
	Problem Statement #7: Family conflict and poor family management issues are greater than that of other communities across the nation.					
	Problem Statement #8: Substance use and abuse by adults is a problem within the county.					
	Problem Statement #9: Poverty and community violence exacerbate family tensions and inhibit healthy conflict management.					
15. To	otal Amount of Funding Requested *					
16. To	otal Cost of Project *					
17. W	ho is your target population? (Adults? Youth? Etc.) *					

14. Problem Statement Project Addresses: *

drug (AOD) issues and promote an AOD free lifestyle? *
Describe your project and the anticipated long-term outcomes regarding AOD using SMART Objectives. *

Include a brief summary below of Budget Allocations, in the following categories: Salaries Taxes/Benefits Equipment/Technology Travel/Mileage Postage/Printing/Supplies Marketing Administrative Costs Other * These items should add up to your Total Grant Request Dollar Amount in number 9.				
These items should dud up to your rotal Grant request Dollar Amount in number 5.				
Summarize any financial resources that will support this program beyond DAC's funding, including existing internal resources. (If none, write "None.") *				

22. Please describe your clients in terms of gender, age, race/ethnicity, household income and employment status. Include any other characteristics which would help panel members better understand the special circumstances and needs of your clients. *
23. Anticipated Total Number Served: *
24. Describe the core features of your program delivery strategy, including the frequency and duration of the program, the materials you will need to deliver the program and your agency's time investment in programming for this project. *

<u>2</u> 5.	"best practices"? (You must choose at least one and write an outcome statement related to this/these objective(s) below in the Other Box.) *						
Best practices are defined as "strategies, activities, or approaches, which have been shown to research and evaluation to be effective in the prevention and/or delay of substance use/about 10 cm. The prevention and the pre							
		Implement evidence-based substance use prevention programs with children/youth					
		Provide community-based programming and education that assists in building skills in parents and/or youth to decrease risk factors and increase protective factors for safe alcohol use, substance use or underage drinking.					
Provide training for or development of peer support programming							
Provide services that aid in reducing barriers to treatment.							
		Educate youth or adults on safe alcohol consumption practices.					
Provide staff development training regarding trauma-informed practice, prevention, ethical to or cultural competence in serving individuals with or at risk for alcohol or substance use cond							
Provide school-based programming that assists in building skills in parents and/or youth risk factors and increase protective factors for safe alcohol use, substance use or underage							
		Other					
26.	Ple *	ase check each option below indicating an understanding the following requirements					
		All Grantees: Program services must include programming elements that address alcohol, prescription drug misuse or illicit drug use in some way (prevention, intervention etc.)					
		Treatment Only: Levels of care must include at least 2 treatment modalities.					
		Treatment Only: Clinical service providers in this grant must be certified by the Division of Mental Health and Addiction or other qualified certification organization. Supportive services offered by other collaborative agencies to the certified treatment providers need to document accreditation or proof of qualitative oversight.					

	be awarded funding for this project. *
	You must check all requirements below to be eligible for funding.
	Attend seven DAC committee meetings (choice of prevention-justice-intervention-higher education-NAND), participate in all committee-sponsored events, including the all DAC meeting and the Annual meeting and at least one county-wide event within the grant year.
	Complete and submit a current "DAC Inventory of Services" survey.
	If agency is a 501(c)3, a full board roster, schedule of board meetings, and a resolution by the executive committee accepting the grant will be submitted before July 1, 2019.
	Acknowledge the Drug and Alcohol Consortium of Allen County as a supporting organization in all media releases and printed materials related to this project.
	Complete and submit a 6-month progress report (due on the last day of January) and 12-month final report (due on the last day of July).
	Maintain generally accepted accounting procedures to provide accurate and timely recording of project-related receipts, expenditures, and unspent funds.
	Submit receipts for any approved equipment purchases.
	Participate in community-wide data collection as requested.
	Be prepared for scheduled or unscheduled site visits to the program during the course of the grant period for auditing purposes.
	If the applicant fails to meet any of the requirements, they will not be eligible for a grant award for the following two years.
28.	By electronically signing your full name below, you are agreeing that you understand the above requirements of your organization, should you be granted funding: *
	By submitting an electronic signature, you are providing an electronic mark, that is held to the same standard as a legally binding equivalent of a handwritten signature provided by you. This does not oblige the signor to the requirements of the MOU items above until an official MOU is agreed upon by both parties (DAC & Grantee).

 $\ensuremath{\mathsf{27}}.$ The items below constitute requirements that will be included in your MOU, should you

29. How did we do on this Request for Proposal format? *

This does not impact your eligibility or score! We just want to serve you well.

	Terrible	Not Good	Neutral	Doable	Easy-peasy
Format was easy	\bigcirc	\bigcirc	\bigcirc		\bigcirc
Questions were understandable	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Process was accessible	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

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