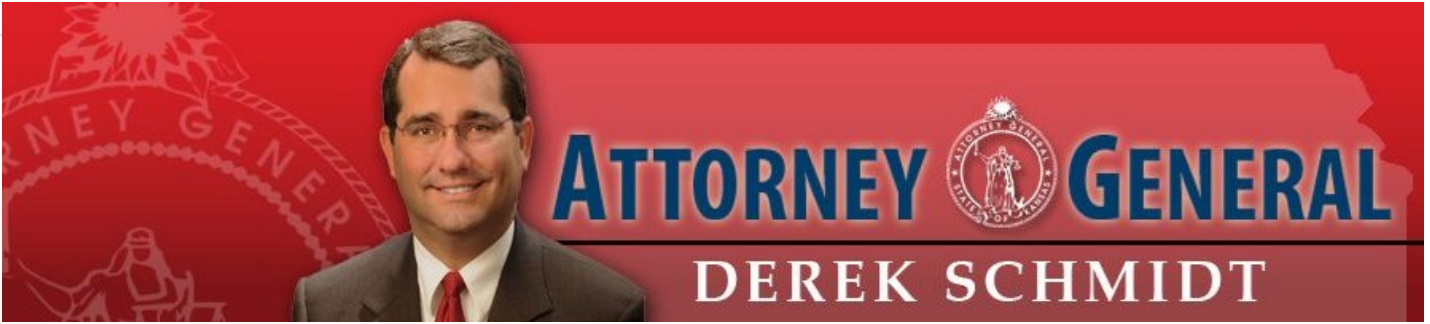


Preview Only--Do Not Submit this Document to the OAG



2023 Grant Application: Office of the Attorney General KS

This portion of the grant application process is for all grant types (CEVC, CVAF, CVAF-CA, PFA, and HTVAF), except for the CAC. Please note that all grants will be on the same application cycle this year. CAC will be processed in April rather than August.

Once you have completed this portion of the grant application (agency related data) and submitted it, you will be forwarded the appropriate grant specific application. You MUST identify those grants to which you will apply on the initial Grant Application form. If you do not, you will not receive the appropriate grant application to complete.

All required forms must be attached before the system will allow you to submit it. You have the ability to save and return to the application if desired.

The 2023 Grant Cycle is open for application from April 4, 2022 to May 3, 2022.

Agency Name *

Agency City

Agency Main Phone number *

Agency Email Address

Website URL

Agency Mailing Address *

Country

Address

Address Line 2 (optional)

City

State, Province, or Region

Zip or Postal Code

Is the street address the same as the mailing address? *

- Yes
- No

Executive Director/President/CEO *

First Name

Last Name

Executive Director/President/CEO Office Phone *



Executive Director/President/CEO Cell Phone



Executive Director/President/CEO Email Address *

Is the Executive Director/President/CEO completing this grant application?

- Yes
- No

Board President *

First Name

Last Name

Board President Phone *



Board President Email Address

Fiscal Officer *

First Name

Last Name

Fiscal Officer Position Title *

Limit: 40 characters

Fiscal Officer Phone Number



Fiscal Officer Email Address

Government EIN # xx-xxxxx *

Employer ID #

Has the EIN changed in the last 12 months?

- Yes
- No

What is your agency's Mission Statement?

Limit: 100 words

Please enter AGENCY-wide number served.



Number served	ACTUAL SFY 2021 grant project	ACTUAL SFY 2022 7/1/2021-3/31/2022 Q1-Q3 3 quarters	PROJECTED SFY 2022 7/1/2021- 6/30/2022 (use actuals for first 3 quarters and project one quarter)	PROJECTED SFY 2023 grant project 7/1/2022-
Children				
Adults				
Total Individuals	0	0	0	0

Crime Victims' Rights

Who is responsible for informing crime victims of their statutory rights under K.S.A. § 74-7301; 74-7333; 74-7335? Please list name(s) and position title(s). *

Limit: 50 words

Who is responsible for assisting crime victims in seeking available compensation benefits? Please list name(s) and position title(s). *

Limit: 50 words

Are these responsibilities written into their job descriptions and this process written into your policy and procedure manual? *

- Yes
- No

The person whose responsibility it is to inform a crime victim of their statutory rights MUST have this written into the position policy and procedures. This is a requirement of the Office of the Attorney General.

Equal Employment Opportunity Program (EEO): Please name the person who has lead responsibility for insuring that all applicable civil rights requirements are met and who acts as a liaison in civil rights matters for your agency. *

In order to achieve appropriate transparency within the agency, the contact must be someone other than the Executive Director of the agency. Often, a board member other than President is designated as the contact.

What type of organization is the agency?

- Not for Profit (or within an umbrella)
- For Profit
- Government
- Other

Agency Accomplishments

This section is optional. The information provided will be used by reviewers to help them understand what your agency has accomplished in the past year. It is recommended to provide at least one accomplishment for the last year.

Accomplishment #1: Please limit your response to 300 words

Limit: 300 words

Accomplishment #2: Please limit your response to 300 words

Limit: 300 words

Accomplishment #3: Please limit your response to 300 words

Limit: 300 words

OAG Grants SFY 2023

Please indicate each grant that you plan to apply for this grant cycle. Once you have indicated that you will apply for a grant, you will be asked to enter an estimated amount and submit a title for the grant. Check as many as apply.

This is used to determine which grant applications you need. Please make sure this is accurate and complete!

Select all Grant Programs Through the OAG for which you intend to apply. *

- Child Exchange and Visitation Center (CEVC)
- Crime Victims Assistance Fund (CVAF)
- Child Abuse: Crime Victims Assistance Fund (CVAF CA) or (CA)
- Human Trafficking Victims Assistance Fund (HTVAF)
- Protection from Abuse (PFA) (Open to DV/SA Agencies)
- Child Advocacy Center (CAC) (New agencies: pre-approval is required to apply)

Select all counties that are served by your agency. *

Select all judicial districts that are served by your agency. *

Required uploads

1. KS SECRETARY OF STATE CERTIFICATE OF GOOD STANDING

- If the applicant is a not-for-profit organization, submit a current copy of the organization's Certificate of Good Standing with the Kansas Secretary of State's Office available at <https://sos.ks.gov/business/certificates-of-good-standing.html>

You may contact the Secretary of State's office for assistance at (785) 296-4564 during the hours of 8am-5pm, Monday - Friday.

2. AGENCY BUDGET – PROPOSED NEXT FISCAL YEAR: Use the link to the form. The budget will be accepted only on this form.

<https://aq.ks.gov/docs/default-source/forms/victims-grants/2023-agency-budget.xlsx>

3. LIABILITY & CASUALTY INSURANCE COVER SHEET

- Submit a current copy of the COVER SHEET ONLY of the organization's liability and casualty insurance policies. Do not include the entire policy, even if a coversheet is not available; if this is the case, include an explanation of the coverage, not the entire policy. If coverage is provided by another organization or government, provide a letter from that entity affirming this.

4. LIST OF CURRENT BOARD MEMBERS: Use the link provided to download the form. Do not attach any other forms.

<https://aq.ks.gov/docs/default-source/forms/victims-grants/2023-board-of-directors-form.xlsx>

5. SEXUAL HARASSMENT POLICY (SHP): Use the link provided to download the form. Sign the document and attach it to the application below.

<https://aq.ks.gov/docs/default-source/forms/victims-grants/sexual-harassment-policy-acknowledgement.pdf>

6. Limited English Proficiency (LEP): Please provide your policy for providing translation services to victims. This may be copied from your Policies and Procedures Manual.
7. MOST RECENT AUDIT REPORT: We will accept reports for 2020 and later. Note that **you will no longer need to mail a bound copy of the audit report now or later in the year** unless specifically requested by our office. The Office of the Attorney General will collect agency audits one time annually (at the time of application) and will accept these reports in a .pdf format (or other approved text format) only.
8. LETTER FROM AUDITORS TO BOARD AND MANAGEMENT: The auditor must provide a summary report in the form of a letter for board and agency management. Please attach that letter here.
9. LETTER OF RESPONSE FROM BOARD: The agency board of directors must respond to the audit report. If there are no deficiencies, they may simply report that they have reviewed the audit and that no deficiencies were identified.
10. ORGANIZATION CHART: Please provide a current organization chart listing both employees and positions.

Please upload the Certificate of Good Standing from the Secretary of State *

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .doc, .docx, .pdf, .rtf, .txt

Please upload your Agency Budget *

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .pdf, .xls, .xlsx

Agency budget form may be downloaded here

<https://ag.ks.gov/docs/default-source/forms/victims-grants/2023-agency-budget.xlsx>

Please upload the cover sheet for your insurance policies. *

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .docx, .pdf

Please upload the list of current board members. *

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .csv, .doc, .docx, .pdf, .rtf, .txt, .xls, .xlsx

This document may be downloaded here. <https://ag.ks.gov/docs/default-source/forms/victims-grants/2023-board-of-directors-form.xlsx>

Please upload a signed and dated acknowledgement of the Sexual Harassment Policy (SHP). *

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .docx, .pdf

This document may be downloaded here. <https://ag.ks.gov/docs/default-source/forms/victims-grants/sexual-harassment-policy-acknowledgement.pdf>

Please upload the current Limited English Proficiency Policy (LEP) *

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .doc, .docx, .pdf, .rtf, .txt

This can be copied from the Policies and Procedures Manual.

Required Audit Information

Before submitting your grant request, a copy of the most recent financial audit report must be attached. In addition, a copy of the letter from the auditor to the board and management, the board and management response to that letter and the auditor's letter to the OAG must also be attached. **Audit must be for FYI 2020 or more recent.**

What FY (Fiscal Year) does the attached audit cover?

Select... ▼

Most recent audit report *

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .doc, .docx, .pdf

Letter from the auditors to board and management *

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .doc, .docx, .pdf

Letter of response from board and management *

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .doc, .docx, .pdf

Please upload the current organizational chart.

Choose File

Upload a file. No files have been attached yet.

Acceptable file types: .csv, .doc, .docx, .pdf, .rtf, .txt, .gif, .jpg, .jpeg, .png, .svg, .tif, .tiff

How do you evaluate or identify Human Trafficking Victims? Do you use a specific tool? If so, what tool are you using?

Optional: In what areas would you like to see the OAG provide additional training?

- Quarterly Reports
- Crime Victims' Compensation
- Grants/Grant Writing: Goals and Objectives

Certification of information

By submitting this grant application, I certify that I am a representative of the * above listed agency and am authorized to submit this grant application on their behalf. I further declare that I have shared the application, its

attachments, and budgets with the appropriate management and board members for their review and approval. All information is accurate and correct to the best of my knowledge. Should a discrepancy be discovered, I will notify the Office of the Attorney General Victim Services Division immediately.

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