Agency Nam	9			
Agency City				
Primary Cont	act for Grant Pr	roject/Progra	am *	
First Name				
Last Name				
Email addres	s for Primary Co	ontact *		
email@example	.com			
Phone Numb	er for Primary (Contact *		
				

No maximum or minimum dollar amount has been established for individual grant awards. However, our agency has been notified by the Governor's Division of the Budget that grant funds comprised of State General Fund dollars could be reduced in SFY 2024. Other grant funds could also be impacted by a reduction in their funding streams as well. If your agency received a grant in the previous state fiscal year and is requesting funds for continuation of the same grant project, it is strongly suggested to limit your requested grant amount to the same or a lesser amount than you received last year. NOTE: there is no guarantee that your full request will be awarded. To view the total amount and awards received last year, please visit the Victim Services Grant Program website at https://ag.ks.gov/victim-services/grants (https://ag.ks.gov/victim-services/grants)

Grants made to programs will be based on the numbers of persons served by the program and will be made only to programs aimed at preventing child abuse and neglect or providing residential services or facilities to victims of child abuse or neglect.

Amo	ount Requested *
\$	USD
Brie	f Description of the CA (Child Abuse and Neglect) Grant Project *
	Limit: 100 words
Did	you receive CVAF-CA funds last year? *
	Yes
	No
	the grant funds awarded be used for an existing project/program or a new ect/program? *
	Existing Project/Program: continue existing grant project or program currently funded with grant funds
	New Project/Program: Create a new project, program, or service activity not previously funded with grant funds

Describe the identified r	ed that will be addressed by the grant project for which
CA (Child Abuse and Ne	lect) grant funds are requested. *
List community partners	
Or upload the 2024 Cor	nunity Partners form from our website or through the li
below.	numity Farthers form from our website or through the in
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New projects will require additional forms and questions to be completed.

Upload a file. No files have been attached yet.

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

Che	eck county or counties this project/program will serve.
	Allen
	Anderson
	Atchison
	Barber
	Barton
	Bourbon
	Brown
	Butler
	Chase
	Chautauqua
	Cherokee
	Cheyenne
	Clark
	Clay
	Cloud
	Coffey
	Comanche
	Cowley
	Crawford
	Decatur
	Dickinson

Doniphan
Douglas
Edwards
Elk
Ellis
Ellsworth
Finney
Ford
Franklin
Geary
Gove
Graham
Grant
Gray
Greeley
Greenwood
Hamilton
Harper
Harvey
Haskell
Hodgeman
Jackson
Jefferson
Jewell

Johnson
Kearny
Kingman
Kiowa
Labette
Lane
Leavenworth
Lincoln
Linn
Logan
Lyon
McPherson
Marion
Marshall
Meade
Miami
Mitchell
Montgomery
Morris
Morton
Nemaha
Neosho
Ness
Norton

Osage
Osborne
Ottawa
Pawnee
Phillips
Pottawatomie
Pratt
Rawlins
Reno
Republic
Rice
Riley
Rooks
Rush
Russell
Saline
Scott
Sedgwick
Seward
Shawnee
Sheridan
Sherman
Smith
Stafford

	Stanton
	Stevens
	Sumner
	Thomas
	Trego
	Wabaunsee
	Wallace
	Washington
	Wichita
	Wilson
	Woodson
	Wyandotte
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27th Judicial District
28th Judicial District
29th Judicial District
30th Judicial District
31st Judicial District

Please complete the table below to indicate service numbers for both children and adults $\ ^{*}$



	А	В	С	D	Е
1	Number served	ACTUAL SFY 2022 grant project	ACTUAL SFY 2023 7/1/2022- 3/31/2023 Q1- •	PROJECTED SFY 2023 7/1/2022- 6/30/2023 (use	PROJECTED SFY 2024 grant project 7/1/2023-
2	Children				
3	Adults				
4	Total Individuals	0	0	0	0

Upload the Project Budget Narrative. *

I and the second			
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	Choose File		
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·			 2

Upload a file. No files have been attached yet.

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

Form may be downloaded from the OAG website or using this link (https://ag.ks.gov/docs/default-source/forms/victims-grants/2023-project-budget-narrative-ca.xlsx).

Proposed Grant Project Goals and Objectives

New Projects or Agencies: Please provide goals that are consistent with the needs statement.

Objectives: Must be SMART. Specific, Measurable, Attainable, Relevant, and Time Limited. The objectives will be used on quarterly reports to measure progress of the project.

List the objectives to be accomplished in order to reach each goal.

Sample Goal: Mental and physical healthcare needs of all children served by the agency will be monitored, addressed and reported to the court

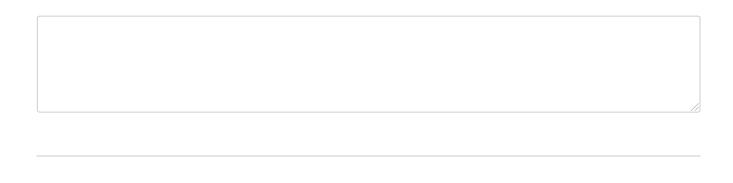
Sample Objective: 95% of approximately 30 children assigned a CASA volunteer during the grant duration will have timely health screenings as per recommended norms (6 month dental, annual physical, etc.)

Goal #1 *		

	Limit: 300 word
Data provided to the OAG, person(s) respo	nsible, tasks, and timeframe.
Objective 1.2	
	Limit: 300 word
	nsible, tasks, and timeframe.
Objective 1.3	
	Limit: 300 word
	Limit: 300 word
Objective 1.3 Data provided to the OAG, person(s) respon	Limit: 300 word
	Limit: 300 word

	Limit: 200 word
Objective 2.1	
Data provided to the OAG, person(s) responsible, tas	sks, and timeframe.
Obio ativo 2.2	
Objective 2.2	
	Limit: 300 word
Data provided to the OAG, person(s) responsible, ta	sks, and timeframe.
Objective 2.3	
	Limit: 300 word
Data provided to the OAG, person(s) responsible, tag	sks, and timeframe.

Limit: 200 word
Limit: 300 word
and timeframe.
Limit: 300 word
and timeframe.



Project Staffing Pattern and Project Coordination (see description below) *



Limit: 400 words

- Describe the staffing pattern that will meet the proposed grant project goal(s), objectives, and evaluation. Describe grant funded job duties or functions of personnel listed, noting any new duties and functions to be done as a result of the grant.
- Include persons responsible for achieving objectives and the supervisors of the individuals, who may not be grant-funded employees.
- Include all staff responsible for monitoring and evaluating the proposed grant project's progress.
- Use the official "Position Title" for each employee. The "Position Title" and the "Employee's Name" in that position must be consistent throughout the entire grant application and all attachments. If the position is vacant, please specify as "Vacant".
- State how the proposed grant project will coordinate with existing agencies and local resources for the population to be served.

Project Monitoring (see description below)					
			/		

Limit: 300 words

- Describe the procedure for monitoring the proposed grant project.
- Who will track the proposed grant project throughout the grant project period?
- What data will be collected?
- How will the information that is monitored be used to encourage success of the proposed grant project?

Limit: 300 words

- Describe the criteria that will be used to evaluate the effectiveness and quality of services provided through the proposed grant project.
- The evaluation should be designed to provide an objective assessment of the effectiveness or input of the proposed grant project.
- Specify the procedures to be used and how the information/data collected will be used to improve the proposed grant project.
- At a minimum, explain how the proposed objectives will be measured and how it will be determined whether the grant project is effectively and efficiently reaching the proposed goal(s) and objectives.

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.

Save Draft

Submit Form