



**Community Services Block Grant (CSBG)  
FY2021 Grantee and Sub-Grantee Application for Funds**

***Instruction Manual***

**A few notes to be mindful of as you are completing the applications:**

- 2021 Allocations will not be finalized until Monday, April 20, 2020 at the earliest
  - *Please use your FY 2020 allocation in the interim or wait until April to finalize the application and funded amounts*
- Sub-Grantee Applications are much shorter, but do require some attachments
  - *Please include Sub-Grantee attachments in the Grantee Applications*
- The Community Initiative Status Form (CISF) is not a required attachment, but is included in the application and in the Application File online simply so Grantees/Sub-Grantees can begin to complete the form as the new fiscal year approaches and familiarize themselves with the reporting requirements.
- Sub-Grantees also need to sign the Assurances
- Submissions:
  - Applications must be edited in Word. They can be submitted to the CSP either in Word or PDF format
  - All Excel attachments must be submitted in Excel format

## 1. GENERAL INFORMATION

### A. Contract Signatory

This is the individual who will be signing the contract with WDH. Typically, for Public Entities, this is the County Treasurer, and for Private Entities, this is the Board Chair.

### B. Point of Contact

This is the individual who maintains the daily functions of CSBG. Usually, this individual is the Executive Director or Grants Coordinator.

### C. Public Hearing

Please click the drop-down menu to select the date of the public hearing from the calendar, and include the location of the public hearing.

## 2. TRIPARTITE BOARD

### A. Seats

Please let seat prescriptions in bylaws reflect the table in the application.

### B. Vacancies

If reporting any vacancies, they should exist at the time of the application, or as an anticipated vacancy at the start of the fiscal year.

### C. Roster

If you have more than nine (9) members serving on your Tripartite Board, you will need to add rows to the Roster table. To do that, highlight the last row of the table, right-click, and select "Insert", then "Insert Rows Below". Continue to do this until you have a sufficient amount of rows for all of your board members. Use the drop-down function under "Sector" to choose their representation. If no term limits exist, put "N/A" in the "Term Expiration" column.

### D. Meetings

Enter the frequency requirements as prescribed by your bylaws, and select a date for the next board meeting, at the time of application completion, from the calendar drop down menu.

## 3. BUDGET

### A. Budget Summary Table

The "Revenue" row should be the total Grantee allocation (Sub-Grantee total allocation if completing for a Sub-Grantee) for the fiscal year. The "Expenses" row will be those line items that the funds are spent on. There is a section for Sub-Grantee spending, direct costs, and indirect costs. If one or more of these line items does not apply to your application, place "\$0" in the line item. The total "Expenses" should match the total "Revenue".

### B. Budget

To complete the budget portion of the application, Grantees will use a template identical to the monthly expenditure report template.

- At the top of the sheet, enter the Tripartite Board’s name and/or the agency that will be receiving payments from the state (ex: Johnson County Tripartite Board/Compass Center for Families). Below that, enter the main contact person for the board/agency.

Tripartite Board Name:	
Contact Person:	

- The categories listed in the “Cost Category” Section can be edited to best fit the Grantee, tripartite board, and Sub-Grantees’ needs. Next to each cost, list the proposed budgeted amount. If a Grantee is applying for discretionary funds, the amount should be listed next to the “Discretionary” category.
  - The “Tripartite Board” tab will be ALL expenses for the county/agency. The “Grand Total Expenditures” line should be the total allocation.
  - The “Administrative Costs” tab will be used to budget for Tripartite Board administrative expenses. This can include Grant Coordinators’ salaries, board travel expenses, office supplies, etc.
  - “Sub-Grantee” tabs will be used to document Sub-Grantees’ proposed budget for CSBG funded projects. Sub-Grantees may choose to edit the line items to better reflect their budget.
  - If a Tripartite Board oversees multiple counties, each county will need its own tab in addition to the “Tripartite Board” tab. The county tab will need to include the amount of funds allocated to the county.
- If a Grantee or Sub-Grantee are funding a Community Initiative, they will need to create a separate line item to track the costs in the “Tripartite Board” tab. Sub-Grantee’s that are only funding a community initiative will not need to create a separate line, as all of their funds are going towards the community initiative.

COST CATEGORY	Budgeted Amount
<b>PERSONNEL SERVICES:</b>	
Salaries & Wages	
Employer Paid Benefits	
<b>SUPPORTIVE SERVICES:</b>	
Communications:	
Telephone	
Postage	
Travel In-State	
Travel Out-of-State	
Training/Conferences/Staff Develop.	
<b>Supplies:</b>	
Consumables	
Commercial Printing	
Publications	
Equipment Purchases	
Real Property Rental	
Equipment Rental	
<b>GRANTS-IN-AID:</b>	
<b>CONTRACTUAL</b>	
<b>DISCRETIONARY</b>	
<b>SUB-TOTAL</b>	\$ - \$
<b>OTHER COSTS:</b>	
a. Indirect	
b.	
c.	
<b>GRAND TOTAL Expenditures</b>	\$ - \$

### C. Discretionary Funds

Discretionary funds can be used to help Grantees offset the cost of completing a Community Needs

Assessment, as well as to assist agencies in building capacity, creating linkages, and additional training and technical assistance. For example, if

an agency wishes to research the causes and conditions of poverty in their community beyond that of their CNA, or facilitate comprehensive working groups of service providers in the area, they may apply for discretionary funds for T/TA and Agency Capacity Building. While there is not a cap placed on discretionary funds for T/TA, be aware that CSP prioritizes the award of discretionary funds to Grantees who need to complete a CNA. For those funds that remain, CSP will award based on the justification provided in the application. Please include as much information in your justification as possible, so that CSP can make decisions in a prompt and informed manner.

**D. Salaries and Wages Detail**

This should only include the positions that are paid with CSBG funds. For Grantees, this table should include positions from your Sub-Grantees too. Include the name of the position, not the individual. The percent (%) of time spent on CSBG-related work, should be the percent of their total salary that is paid out of CSBG. For example, if the Executive Director’s annual salary is \$65,000 at 12 months, and they spend 75% of their time on CSBG, their CSBG portion would be \$48,750 (\$65,000 x .75 = \$48,750).

Title/Position	Annual Salary	# of Months	Time Spent on CSBG (%)	CSBG Portion of Salary
Executive Director	\$65,000	12	75	\$ 48,750

**E. Funded Projects**

This section should mimic your Statement of Work (SOW) for the WDH 2021 Contract. If you do not have Sub-Grantees, please just enter your agency/program. Sub-Grantees will be required to complete their own applications, where they will provide a narrative of the services being provided and what needs are being met. Grantees, please get the information to complete columns “Services/Project Description” and “Need(s) Met by Service Provision” from the Sub-Grantee applications.

**4. DATA REPORTING**

**A. Federal Objectives**

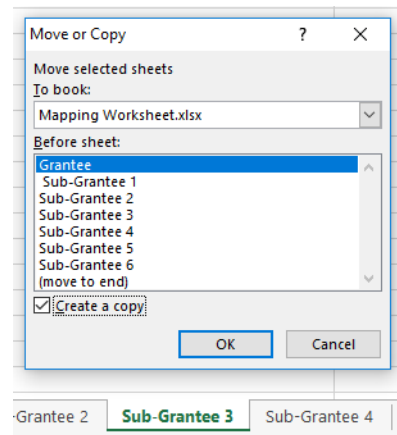
Grantees, this will be an aggregate of all of your Sub-Grantees’ reporting domains (if you have any). This may mean that all the boxes are checked. That is okay, please just ensure that all Sub-Grantee domains are reflected. Once again, this information will come from Sub-Grantees’ applications. If applying for discretionary funds for Linkages and/or Agency Capacity Building, please select those domains, too. You will be expected to track the outcomes/success of those partnerships.

**B. National Goals**

Grantees, this will be an aggregate of all of your Sub-Grantees (if you have any), similar to the section above. Please be reminded that Goal 2 is directly related to community initiatives (Module 3 in the Annual Report).

**C. National Performance Indicators**

The Mapping worksheet, while option last year, is now required for all programs. Each Sub-Grantee should have their own Mapping Worksheet, however they can be captured in the same Excel document simply by adding “Sheets”. This can be done by right-clicking a sheet at the bottom of the Excel document, and selecting “Move or Copy”. Select the sheet you want to copy, and make sure the “Create a Copy” box is checked. Ensure each Sub-Grantee has their own Mapping Worksheet in the Excel document.



## 5. PLANNING

### A. Community Action Plan

#### 1. Mission Statement

- a. The Tripartite Board’s mission statement should go here, not the mission statement of your Sub-Grantees.

#### 2. Community Needs Assessment

- a. The date of the most recent COMPLETED CAN. If you are in the process of completing your CNA, but do not have results back yet, you can utilize your previously completed CNA. However, this should be updated when the new CNA is available.
- b. Describe briefly the methodology used for completing the CNA. Did this include focus groups and community meetings, resident surveys, service provider surveys? How were the data analyzed? What was the Tripartite Board’s role in completing the CNA?
- c. Please identify the top needs that were prioritized as a part of the CNA. If more than three needs were identified as most prevalent/common, feel free to add rows. To do this, simply add lines after #3.

#### 3. Service Delivery System

- a. This should be exactly what will be reported in the WDH 2021 contract SOW, as well as on the “Funded Projects” section of the application.
- b. How will the Tripartite Board meet unmet needs that have been identified in the CNA?

- c. This question should be answered regarding not only the Grantee services, but also for that of your Sub-Grantees, if you have any.
  - 4. Existing Community Resources/Linkages
    - a. Describe any partnerships that the Tripartite Board and/or Sub-Grantees have with non-CSBG providers in the community or state. How do client's needs get met when the Grantee and/or Sub-Grantees cannot meet it?
  - 5. Community Initiatives
    - a. If your CNA identified community-level needs, is there a plan in place (until the next CNA is completed) to address those needs? Will there be a funded community-level initiative?
  - 6. Data Analysis and Evaluation
    - a. How will the Tripartite Board monitoring programs for success? Is there a process in place for the Tripartite Board to determine when CSBG is producing successful outcomes?

**B. Community-Level Initiatives**

The CISF should only be used when an agency is reporting outcomes for Goal 2. According to the Federal Office of Community Services (OCS), community-level work can be done in four (4) phases: Formative Phase, Formal Planning Phase, Active Implementation Phase, and Maturity Phase. A community-level initiative can take years to fully mature and produce reportable outcomes. Please review the CISF and the Dear Colleague Letter-2020-14: Community-Level Transformation (found here: <https://www.acf.hhs.gov/ocs/resource/csbg-dear-colleague-2020-14-community-level-transformation-module-3-guidance>) for more information. While the CISF does NOT need to be added as an attachment for the submission of the application, but you and your programs/Sub-Grantees should begin to familiarize yourselves with the CISF and the reporting requirements.

**6. RISK**

**A. STAR Risk Assessment**

The STAR Risk Assessment needs to be completed using Excel, as it auto-populates your scores. Please refer to the "Risk Categories and Risk Factors" scale to determine where your agency sits. Simply input your scores for each question (1-5) and it will auto-calculate your total score, based on all of the categories, found on the second tab, "Agency STAR Results". Please enter your overall score in the application.



*\*\*\*Sub-Grantees are not required to complete the STAR Risk Assessment for submission of their application, but it may be a useful tool for Grantees to use in monitoring.*

## **7. TRAINING AND TECHNICAL ASSISTANCE**

### **A. Needs**

Please check all of the boxes of potential training and technical assistance topics in which you believe you as the Grantee and/or your Sub-Grantees need. If there is a topic that you and/or your Sub-Grantees need or would like training and technical assistance on, please use the “Other” row and explain in detail the topic. This information will be shared with CSNOW so a more targeted approach to providing T/TA can be used for the upcoming fiscal year.

## **8. SUB-GRANTEES**

Grantees, only complete this section if you have Sub-Grantees.

### **A. Monitoring**

As per the WDH 2021 Contract, and CSP Policy #3: Monitoring Policy and Procedure, Grantees are required to monitor their Sub-Grantees on-site annually. Please use this question to describe the plan and/or schedule for monitoring. If it is easier to provide the information with an attachment, please indicate so in the application, and submit your narrative or schedule of monitoring with the application and the required attachments.

### **B. Monitoring Tools**

Use of the CSP Sub-Grantee Monitoring Tool is not required but is available to use. Please indicate whether or not you and the Tripartite Board will be utilizing such in your annual monitoring. If not, please provide a narrative or itemized list of the topics covered in the Grantee/Service Area-specific Sub-Grantee Monitoring Tool being used. If it is easier to provide the information with an attachment, please indicate so in the application, and submit your narrative or Sub-Grantee Monitoring Tool with the application and the required attachments.