**FAMILY VIOLENCE PREVENTION SERVICE ACT (FVPSA)**

**FUNDING OPPORTUNITY 2021 thru 2023**

**PREPARATION TOOL FOR APPLICANTS**

FVPSA has created a preparation tool to assist you with the new competitive pre-application process. FVPSA staff strongly encourage applicants to begin developing the pre-application responses as soon as time allows.

* FVPSA strongly suggests that you develop your pre-application responses by using the preparation tool created for this project.
* As always, please submit your questions to: NCFVPSA@DOA.NC.GOV

The preparation tool has been created to:

* Allow applicants time to assess the information required for the pre-application process and decide if they want to submit
* Allow applicants time to prepare, research and gather the important responses needed for the competitive pre-application process
* Allow applicants time to prepare the information needed in a format that will allow them to transfer the information into the “one-session” pre-application format

**Process and Guidance**

**Summary of funding concept**

FVPSA will be intentional with diversifying funding allocations. FVPSA funding priorities have shifted to more specifically include service providers that have demonstrated the capacity to serve the marginalized populations identified through the NC Domestic Violence Needs Assessment, while also adhering to the reporting requirements associated with the funds. FVPSA is seeking to fund service providers that demonstrate:

* + innovative and effective practices for serving marginalized populations (including survivors)
	+ enhanced capacity building for serving marginalized populations

(including survivors)

* + increased family violence awareness
	+ engagement in coordination of services among community partners
	+ collaborative initiatives to reduce incidents of family violence

The application process is part of a coordinated effort that will allow NC FVPSA to respond the U.S. Department of Health and Human Services Administration for Children and Families about the following:

* Identifying “Current Underserved Populations and Identification Process”
* Identifying “Populations Targeted for Outreach and Services and Justification”
* Identifying services that include “Children That Witness Family Violence/Domestic Violence”
* Identifying services that include “Teen Dating Violence”
* Serving American Indians/Tribes and Identifying “Significant barriers that impact the tribal communities”
* Serving Immigrant Crime Victims
* Providing a “Description of NC’s Target Populations and Culturally Appropriate Services”

FVPSA will fund only one “service delivery” per applicant in one of two categories below

Applicants must choose only one (1) of the service delivery categories below as part of the competitive process:

* + Domestic violence services (DV)
	+ Prevention-Specialized services (PS)

Applicants will have to focus on one service in this category “Prevention” or “Specialized”

* + Applicants selected to submit the Final grant application will continue to focus on one of two service delivery categories of funding ONLY
	+ Applicants must submit the competitive pre-application in format provided ONLY
	+ FVPSA staff will not accept multiple versions of the application.
	+ Be sure to review your application prior to submission.
	+ Multiple submissions of the application will deem you ineligible for consideration for funding
	+ The applicants selected will be required to complete and submit a Final Grant Application
	+ The Final Grant Application due date will be provided with the next steps
	+ Be aware that there will be additional details and requirements if your program is selected to submit a Final grant application.
* It is important to follow all instructions and all details
* Applicant responses should not exceed 20,000 characters (not words) per response

**Example of 20,000 characters “with spaces” for guidance:**

***Family Violence Prevention Services Act (FVPSA)***

*FVPSA is a federal funding source to assist with ending domestic violence-intimate partner violence. The North Carolina Council for Women and Youth Involvement administers the FVPSA Program which serves as the primary federal funding stream dedicated to the support of emergency shelter and related assistance for victims of domestic violence and their children.*

*The NC FVPSA grant program is funded by the U.S. Department of Health and Human Services Administration for Children and Families.*

*FVPSA is committed to providing high quality, efficient, and effective sub-recipient customer service through guidance, support services, collaboration, compliance, and technical expertise during the life of the grant. Our success relies upon the success of our grantees in providing services to communities across the state and in complying with all federal and state guidelines.*

*FVPSA has an ongoing focus on economic empowerment and increasing access to services and increasing inclusion to Tribal communities, culturally specific communities while also focusing on trauma-informed care services, language access services, mental health access services, accessible transportation services to citizens across North Carolina. FVPSA’s present initiatives, as they align with the NC DV Advocates Needs Assessment, include increasing access to services for unserved, underserved, or inadequately served communities, including survivors experiencing substance use disorders and other mental illness, survivors experiencing transportation, food, housing, employment, other forms of socioeconomic security, and survivors experiencing financial abuse.*

*FVPSA continues to coordinate statewide improvements within local communities, social service systems, and programming regarding the prevention and intervention of family violence, domestic violence, and teen dating violence through the leadership of the State Administrator and the Domestic Violence Coalition.*

**This is not the application and it should not be submitted.**

**It is a preparation tool ONLY**

|  |
| --- |
| Provide the Agency/Program’s Name*If the Agency/Program is referenced by another name, list it below****(respond below)*** |
| **PROVIDE THE FULL NAME LISTED ON YOUR LEGAL DOCUMENTS HERE*****If the Agency/Program is referenced by another name, list it here*** |
|  |
| Provide the Agency/Program’s Tax Identification Number ***(respond below)****Tax Identification number is a Federal nine-digit tax number that* ***IRS*** *assigns to nonprofits, charities, organizations, and businesses in the following format: XX-XXXXXXX.* |
| **PROVIDE THE XX-XXXXXXX HERE** |
|  |
| Provide the Agency/Program’s Administrative Address ***(respond below)******This address may be the location for staff ONLY and may exclude any service delivery*** |
| **P.O Box is not acceptable for the purpose of this funding project****Example:** **NC CFWYI-FVPSA****116 W. Jones Street Raleigh NC 27603 Suite G102**  |
|  |
| Provide the Agency/Program’s Service Delivery Location Address *(****respond below)******This location may be different from the “Administrative location “ and will by visited by FVPSA staff as part of a monitoring site visit***  |
| **Personal/Residential location is not acceptable for the purpose of this funding project****Example:** **NC CFWYI-FVPSA****116 W. Jones Street Raleigh NC 27603 Suite G102** |
|  |
| Is this your first time submitting an application for FVPSA funds (respond below)? |
| Type “Yes” or “No” here: ***YES or NO*** |
|  |
| If you are you presently receiving FVPSA (Family Violence Prevention Services Act) funds, provide the present FVPSA award amount stated on the contract (respond below) |
| List the present FVPSA award amount listed on the contract here: **$XXXX.XX** |
|  |
| Agency/Program is classified as a **Nonprofit** or **Government** entity ***(respond below)*** |
| INDICATE: NONPROFIT OR GOVERNMENT ENTITY |
|  |
| Provide the County (or Counties) served Provide the population of each County served as of July 2020*FVPSA has provided the link below for the purpose of this application.* *Use the link below to get the population information as of July 2020*[*https://files.nc.gov/ncosbm/demog/countytotals\_populationoverview.html*](https://files.nc.gov/ncosbm/demog/countytotals_populationoverview.html)*Example of response: “Name of County” served- Population as of July 2020=”?????”**Multi-county program will need to list each county + the population as of July 2020 for each county* ***(respond below)*** |
| **XX COUNTY-1234,567,890 AS OF JULY 2020****XX COUNTY-098,765,4321 AS OF JULY 2020****XX COUNTY-1,356,709 AS OF JULY 2020** |
|  |
| Type “Yes” or “No” here: YES or NO |
|  |
| If your service delivery includes "shelter services", indicate if you have a "brick and mortar" shelter (respond below) |
| **Yes, our program has a "brick and mortar" shelter(s) OR****No, our program does not have a "brick and mortar" shelter** |
|  |
| If you indicated "yes" to question #10, provide the number of "brick and mortar" shelters (respond below) |
| **PROVIDE THE # OF SHELTERS HERE** |
|  |
|  |
| *If awarded funds, please keep FVPSA staff updated on any changes below.* *Submit questions and changes to:* *NCFVPSA@doa.nc.gov* |
|  |
| Provide the **current** Executive Director or Equivalent’s Name ***(respond below)*** |
| **PROVIDE A NAME HERE** |
|  |
| Provide the **current** Executive Director or Equivalent’s Email Address *(****respond below)*** |
| **PROVIDE EMAIL ADDRESS HERE** |
|  |
| Provide the **current** Governing Board Chair or Equivalent’s Name **(*respond below)*** |
| **PROVIDE A NAME HERE** |
|  |
| Provide the **current** Governing Board Chair or Equivalent’s Email Address***(respond below)*** |
| **PROVIDE EMAIL ADDRESS HERE** |
|  |
| Provide the **current FVPSA Project Director** or Equivalent’s Name-If applicable ***(respond below)*** |
| **PROVIDE A NAME HERE** |
|  |
| Provide the **current FVPSA Project Director** or Equivalent’s email address-If applicable (***respond below)*** |
| **PROVIDE EMAIL ADDRESS HERE** |
|  |
| FVPSA staff has experienced undue administrative burden due to programs having difficulty with meeting the reporting requirements associated with the FVPSA funds.It is important that the FVPSA grant recipient has the capacity to fulfill all reporting requirements. Provide the position(s)/title (s) responsible for completing and submitting the following important documents and ***Do Not include the name of a specific person/individual*** ***(respond below)*****5 POINTS MAXIMUM ALLOWED FOR THIS SECTION** |
|  |
| ***(1 PT)*** Provide the name of the position(s)/title(s) responsible for: Completing and submitting **the Final grant application** **(*respond below)*** |
| **State the position/title here-DO NOT PROVIDE A PERSON’S NAME** |
|  |
|  |
| ***(1 PT)***Provide the name of the position(s)/title(s) responsible for:Completing and submitting **the FVPSA grant contract** ***(respond below)*** |
| **State the position/title here-DO NOT PROVIDE A PERSON’S NAME** |
|  |
| ***(1 PT)*** Provide the name of the position(s)/title(s) responsible for:Completing and submitting the **monthly reimbursement report** by the 10th of the month***\*This position should have knowledge and experience in working with Federal grant financial concepts******(respond below)*** |
| **State the position/title here-DO NOT PROVIDE A PERSON’S NAME** |
|  |
| \*\*Is this position “occupied” or “vacant”? If vacant, when will the position become occupied?*(****respond below)*** |
| **Vacant at the time of application-to be filled by Month? Year? OR Occupied at the time of application** |
|  |
| ***(1 PT)***Provide the name of the position(s)/title(s) responsible for:Completing and submitting the **semi-annual performance(data) reports** due April 15th and October 15th***\*This position should have knowledge and experience in working with data collection concepts*** ***(respond below)*** |
| **State the position/title here-DO NOT PROVIDE A PERSON’S NAME** |
|  |
| ***(1 PT)*** Provide the name of the position(s)/title(s) responsible for:Completing and submitting the **annual desk monitoring** review report ***(respond below)*** |
| **State the position/title here-DO NOT PROVIDE A PERSON’S NAME** |
|  |
| **Social Media Outreach***The competitive review process will include accessing and viewing your agency’s website and social media outlets. Existing programs should be acknowledging FVPSA’s funding support (FVPSA logo)***5 POINTS MAXIMUM ALLOWED FOR THIS SECTION** |
| Provide your program’s **current** **website address** ***(respond below)***  ***If not applicable: type “N/A” below*** |
| **Example: https://ncadmin.nc.gov/advocacy/women/family-violence-prevention-and-services-act** |
|  |
| Provide your program’s **current Facebook** name/link ***(respond below) If not applicable: type “N/A” below*** |
| **Example: https://www.facebook.com/cfwyi** |
|  |
| Provide your program’s **current Twitter** name/link ***(respond below)* *If not applicable: type “N/A” below*** |
| **Example: N/A** |
|  |
| Provide your **current Instagram** name**/**link ***(respond below)* *If not applicable: type “N/A” below*** |
| **Example: N/A** |
|  |
| **Specify “Other” current social media source *(respond below)* *If not applicable: type “N/A” below*** |
| **Example: N/A** |
|  |
| ***(5 PTS***)Describe how your program uses your website and social media to provide information and as a form of outreach in the community. You should include COVID 19 related outreach and information shared during 2020. ***(clear and concise response below)***  |
| ***CHARACTER LIMIT EXAMPLE******FVPSA is a federal funding source to assist with ending domestic violence-intimate partner violence. The North Carolina Council for Women and Youth Involvement administers the FVPSA Program which serves as the primary federal funding stream dedicated to the support of emergency shelter and related assistance for victims of domestic violence and their children.*** ***The NC FVPSA grant program is funded by the U.S. Department of Health and Human Services Administration for Children and Families.*** ***FVPSA is committed to providing high quality, efficient, and effective sub-recipient customer service through guidance, support services, collaboration, compliance, and technical expertise during the life of the grant. Our success relies upon the success of our grantees in providing services to communities across the state and in complying with all federal and state guidelines.*** ***FVPSA has an ongoing focus on economic empowerment and increasing access to services and increasing inclusion to Tribal communities, culturally specific communities while also focusing on trauma-informed care services, language access services, mental health access services, accessible transportation services to citizens across North Carolina. FVPSA’s present initiatives, as they align with the NC DV Advocates Needs Assessment, include increasing access to services for unserved, underserved, or inadequately served communities, including survivors experiencing substance use disorders and other mental illness, survivors experiencing transportation, food, housing, employment, other forms of socioeconomic security, and survivors experiencing financial abuse.******FVPSA continues to coordinate statewide improvements within local communities, social service systems, and programming regarding the prevention and intervention of family violence, domestic violence, and teen dating violence through the leadership of the State Administrator and the Domestic Violence Coalition.*** |
|  |
| Does your program have a person designated to maintain the social media information? ***(respond below)*** |
| ***Type “Yes” or “No” here: YES or NO*** |
|  |
| ***Governing Board/Equivalent-Oversight and Support*** |
| ***\*\*\*It is a good practice to review your By-Laws and Policies on an annual basis\*\*\**** |
| ***25 POINTS MAXIMUM ALLOWED FOR THIS SECTION*** |
| Provide the total number of **current** Governing Board members *(****respond below)*** |
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|  |
| ***(5 PTS)***Provide the total number of Governing Board meetings held over the past 12-months and include the dates, meeting format and Board members in attendance at each meeting.***A quorum = the number of members of a body defined as competent to transact business in the absence of the other members. The purpose of a quorum rule is to give decisions made by a quorum enough authority to allow binding action to be conducted. A quorum consists of a simple majority of members.*** ***A quorum is the minimum number of members of an assembly or society that must be present at any of its meetings to make the proceedings of that meeting valid.***Example:**November 20, 2019-**7 out of 12 members total in attendance-In-person meeting-Board Chair + Board Secretary + Board Treasurer + Board Co-Chair + Finance Committee Members x 3**March 18, 2020-**10 out of 12 members total in attendance-Conference Call format for meeting-Board Chair + Board Secretary + Board Treasurer + Board Co-Chair + Finance Committee Members x 3 + Fundraising Committee members x 3**July 15, 2020-**6 out of total in attendance-Conference Call format for meeting-Board Chair + Board Secretary + Board Treasurer + Finance Committee Member x 1 + Fundraising Committee member x 1 + Former client/victim-member x 1 + Service overview Committee member x 1***(respond below)*** |
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|  |
| ***(5 PTS)***Explain how your Governing Board receives details about each grant received including the grant financial information (amount of grant, balance of grant, etc.)Provide the frequency and the format submitted to the Governing Board.***(clear and concise response below)****Example:**The Agency’s Finance Officer prepares a monthly spreadsheet and submits it to the Board Treasurer and Finance committee members quarterly by email. The quarterly spreadsheet provides the details of each grant including the funder’s contact information (person-email address +phone number), the grant award amount for each grant, when the grant begins and ends, the amount spent against each grant, and the balance of each grant.* |
| ***Provide clear and concise details below*** |
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|  |
| ***(5 PTS)*** Describe how your Governing Board supports sustainability of service delivery with any form of fundraising (including raising unrestricted funds) or volunteering. Include any recent specific activities by providing the timeframe and who was involved.***(clear and concise response below)*** |
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|  |
| ***(5 PTS)*** Describe the Governing Board’s familiarity and support of the program’s service delivery pertaining to family violence prevention concepts (include personnel activities). This response may include specific trainings provided to the members***. (clear and concise response below)*** |
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|  |
| ***(5 PTS)*** Describe how your agency in collaboration with the Governing Board combats bias, discrimination, and inequitable treatment from management toward staff and staff or management toward clients/survivors. Include any recent specific creative activities/trainings including implicit bias and equity trainings that support fair and equal treatment and promotes inclusiveness.***(clear and concise response below)*** |
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| **Outreach Plan -Community Outreach and Community Partners** |
| ***10 POINTS MAXIMUM ALLOWED FOR THIS SECTION*** |
|  |
| ***(5 PTS)*** Describe your program’s **community outreach to a marginalized population** during the past 12 months. You should include COVID 19 related outreach and information shared during 2020.Specify the marginalized population ***(respond below)*** Provide a timeline and/or frequency of outreach activities including creative approaches due to COVID 19, virtual activities, social media activities and staff/stakeholders involved with the process ***(respond below)******Example:***Provide a brief overview of the outreach project activities ***(respond below)******(clear and concise response below)*** |
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|  |
| ***(5 PTS)*** Describe your program’s **community partnerships***Examples of community partnerships: law enforcement, mental health partners, housing partners, healthcare partners, transportation partners, education partners, faith-based partners, social service partners*Provide the names of your community partners ***(respond below)******Be prepared to submit the community partnership MOA’s and/or MOU’s that supports community collaboration*** Provide a brief overview of projects and activities involving community partners ***(respond below)*****(*clear and concise response below)*** |
| Provide the names of community partners below |
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|  |
| Provide a clear and concise overview of project activities below |
| ***CHARACTER LIMIT EXAMPLE******FVPSA is a federal funding source to assist with ending domestic violence-intimate partner violence. The North Carolina Council for Women and Youth Involvement administers the FVPSA Program which serves as the primary federal funding stream dedicated to the support of emergency shelter and related assistance for victims of domestic violence and their children.*** ***The NC FVPSA grant program is funded by the U.S. Department of Health and Human Services Administration for Children and Families.*** ***FVPSA is committed to providing high quality, efficient, and effective sub-recipient customer service through guidance, support services, collaboration, compliance, and technical expertise during the life of the grant. Our success relies upon the success of our grantees in providing services to communities across the state and in complying with all federal and state guidelines.*** ***FVPSA has an ongoing focus on economic empowerment and increasing access to services and increasing inclusion to Tribal communities, culturally specific communities while also focusing on trauma-informed care services, language access services, mental health access services, accessible transportation services to citizens across North Carolina. FVPSA’s present initiatives, as they align with the NC DV Advocates Needs Assessment, include increasing access to services for unserved, underserved, or inadequately served communities, including survivors experiencing substance use disorders and other mental illness, survivors experiencing transportation, food, housing, employment, other forms of socioeconomic security, and survivors experiencing financial abuse.******FVPSA continues to coordinate statewide improvements within local communities, social service systems, and programming regarding the prevention and intervention of family violence, domestic violence, and teen dating violence through the leadership of the State Administrator and the Domestic Violence Coalition.*** |
|  |
| ***Applicants must choose only one (1) of the service delivery categories below for funding request:******Domestic Violence services (DV)******Prevention-Specialized services (PS)*** |
| *The Family Violence Prevention and Services (FVPSA) grants fund local public, private, nonprofit, and faith-based organizations and programs demonstrating effectiveness in the field of domestic violence services and prevention****.*** *FVPSA funded domestic violence programs provide immediate shelter and supportive services for individuals experiencing domestic or dating violence and their dependents.* |
|  |
| Applicant is submitting application **for Domestic Violence Services funding *(respond below)*** |
| ***Type “Yes” or “No” here: YES or NO*** |
|  |
| How many years has your program/agency provided **“Domestic Violence**” Services ***(respond below)*** |
| **10 years-Since January 2010** |
| Applicant is submitting application **for Prevention-Specialized Services funding *(respond below)*** |
| ***Type “Yes” or “No” here: Yes or NO*** |
|  |
| How many years has your program/agency provided “**Prevention or Specialized**” Services***(respond below)*** |
| **5 years-Since June 2015** |
|  |
| ***Prevention-Specialized Service Plan*** ***(You can only respond to one category in this section)******THIS SECTION WILL FOCUS ON:******Specialized Service Plan or Prevention Service Plan******(Complete this section ONLY if it is applicable to your service delivery)*** |
|  |
| ***20 POINTS MAXIMUM ALLOWED FOR THIS SECTION*** |
| *Review the FVPSA* ***“Specialized”*** *service plan categories below and choose one (1) category that best fits your project’s service activities**You must state two (2) specific factors for choosing the category* |
|  |
| **Specialized Service Plan Categories** |
| * **Primarily providing training, technical assistance**, and outreach to increase awareness of family violence, domestic violence, and dating violence and increase the accessibility of family violence, domestic violence, and dating violence services

***(Specialized Services)*** |
| * Primarily providing culturally and linguistically appropriate services

***(Specialized Services)*** |
| * **Primarily providing services for children exposed to family violence**, domestic violence, or dating violence, including age-appropriate counseling, supportive services, and services for the non-abusing parent that support that parent’s role as a caregiver, which may, as appropriate, include services that work with the non-abusing parent and child together

***(Specialized Services***) |
| * **Primarily providing advocacy, case management services**, and information and referral services, concerning issues related to family violence, domestic violence, or dating violence intervention and prevention, including—

assistance in accessing related Federal and State financial assistance programs; legal advocacy to assist survivors and their dependents; medical advocacy, including provision of referrals for appropriate health care services (including mental health, alcohol, and drug abuse treatment), **but which shall not include reimbursement for any health care services;** assistance locating and securing safe and affordable permanent housing and homelessness prevention services; provision of transportation, child care, respite care, job training and employment services, financial literacy services and education, financial planning, and related economic empowerment services; and parenting and other educational services for survivors and their dependents***(Specialized Services)*** |
| Choose the Specialized Service Plan that best fits your service delivery based on the categories listed above ***(respond below)***\*\*You can choose ***only one (1) Specialized Service Plan*** that best fits your service delivery |
| **Service delivery category *(respond here)******EXAMPLE RESPONSE:*****Primarily providing services for children exposed to family violence**, domestic violence, or dating violence, including age-appropriate counseling, supportive services, and services for the non-abusing parent that support that parent’s role as a caregiver, which may, as appropriate, include services that work with the non-abusing parent and child together |
|  |
| State two (2) specific factors for choosing this category ***(respond below)*** |
| ***(5 PTS)*** **Factor 1*(clear and concise response below)*** |
| ***CHARACTER LIMIT EXAMPLE******FVPSA is a federal funding source to assist with ending domestic violence-intimate partner violence. The North Carolina Council for Women and Youth Involvement administers the FVPSA Program which serves as the primary federal funding stream dedicated to the support of emergency shelter and related assistance for victims of domestic violence and their children.*** ***The NC FVPSA grant program is funded by the U.S. Department of Health and Human Services Administration for Children and Families.*** ***FVPSA is committed to providing high quality, efficient, and effective sub-recipient customer service through guidance, support services, collaboration, compliance, and technical expertise during the life of the grant. Our success relies upon the success of our grantees in providing services to communities across the state and in complying with all federal and state guidelines.*** ***FVPSA has an ongoing focus on economic empowerment and increasing access to services and increasing inclusion to Tribal communities, culturally specific communities while also focusing on trauma-informed care services, language access services, mental health access services, accessible transportation services to citizens across North Carolina. FVPSA’s present initiatives, as they align with the NC DV Advocates Needs Assessment, include increasing access to services for unserved, underserved, or inadequately served communities, including survivors experiencing substance use disorders and other mental illness, survivors experiencing transportation, food, housing, employment, other forms of socioeconomic security, and survivors experiencing financial abuse.******FVPSA continues to coordinate statewide improvements within local communities, social service systems, and programming regarding the prevention and intervention of family violence, domestic violence, and teen dating violence through the leadership of the State Administrator and the Domestic Violence Coalition.*** |
|  |
| ***(5 PTS)*****Factor 2 *(clear and concise response below)***  |
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|  |
| ***(10 PTS)*** Describe how your program services have been delivered to survivors/clients **during the past 12 months.** You should include COVID 19 related outreach and information shared during 2020. The response should include- activities/tasks, projects, timeline/frequency and/or timeframes***(clear and concise response below)***  |
| ***CHARACTER LIMIT EXAMPLE******FVPSA is a federal funding source to assist with ending domestic violence-intimate partner violence. The North Carolina Council for Women and Youth Involvement administers the FVPSA Program which serves as the primary federal funding stream dedicated to the support of emergency shelter and related assistance for victims of domestic violence and their children.*** ***The NC FVPSA grant program is funded by the U.S. Department of Health and Human Services Administration for Children and Families.*** ***FVPSA is committed to providing high quality, efficient, and effective sub-recipient customer service through guidance, support services, collaboration, compliance, and technical expertise during the life of the grant. Our success relies upon the success of our grantees in providing services to communities across the state and in complying with all federal and state guidelines.*** ***FVPSA has an ongoing focus on economic empowerment and increasing access to services and increasing inclusion to Tribal communities, culturally specific communities while also focusing on trauma-informed care services, language access services, mental health access services, accessible transportation services to citizens across North Carolina. FVPSA’s present initiatives, as they align with the NC DV Advocates Needs Assessment, include increasing access to services for unserved, underserved, or inadequately served communities, including survivors experiencing substance use disorders and other mental illness, survivors experiencing transportation, food, housing, employment, other forms of socioeconomic security, and survivors experiencing financial abuse.******FVPSA continues to coordinate statewide improvements within local communities, social service systems, and programming regarding the prevention and intervention of family violence, domestic violence, and teen dating violence through the leadership of the State Administrator and the Domestic Violence Coalition.*** |
|  |
| **Prevention Service Plan Categories** |
| ***Prevention Service Plan******(If applicable to your service delivery*** |
| *Review the FVPSA* ***“Prevention”*** *service plan categories below and choose one (1) category that best fits your project’s service activities**You must state two (2) specific factors for choosing the category* |
|  |
| Choose the Prevention Service Plan that best fits your service delivery based on the categories listed above ***(respond below)***\*\*You can choose ***only one (1) Prevention Service Plan*** that best fits your service delivery |
| * **Primary prevention** means strategies, policies, and programs to stop both first-time perpetration and first-time victimization. Primary prevention is stopping domestic and dating violence before they occur. Primary prevention includes but is not limited to: School based violence prevention curricula, programs aimed at mitigating the effects on children of witnessing domestic or dating violence, community campaigns designed to alter norms and values conducive to domestic or dating violence, worksite prevention programs, and training and education in parenting skills and self-esteem enhancement.
 |
| * **Secondary prevention** is identifying risk factors or problems that may lead to future family, domestic, or dating violence, and taking the necessary actions to eliminate the Risk factors and the potential problem, and may include, but are not limited to, healing services for children and youth who have been exposed to domestic or dating violence, home visiting programs for high-risk families, and screening programs in health care settings.
 |
|  |
| **Service delivery category *(respond here)******EXAMPLE RESPONSE:*****Primary prevention means strategies, policies, and programs to stop both first-time perpetration and first-time victimization. Primary prevention is stopping domestic and dating violence before they occur. Primary prevention includes but is not limited to: School based violence prevention curricula, programs aimed at mitigating the effects on children of witnessing domestic or dating violence, community campaigns designed to alter norms and values conducive to domestic or dating violence, worksite prevention programs, and training and education in parenting skills and self-esteem enhancement.** |
|  |
| State two (2) agency service specific factors for choosing this category ***(respond below)*** |
| ***(5 PTS)*** **Factor 1 *(clear and concise response below)***  |
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|  |
| ***(5 PTS)*** **Factor 2 *(clear and concise response below)***  |
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|  |
| ***(10 PTS)*** Describe how your ***“Primary or Secondary Prevention”*** services have been delivered to survivors/clients during the past 12 months. You should include COVID 19 related outreach and information shared during 2020.Response should include activities/tasks, projects, timeline/frequency and/or timeframes. ***(clear and concise response below)***  |
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| State two (2) specific factors for choosing this category ***(clear and concise response below)***  |
| ***(5 PTS)*** **Factor 1*(clear and concise response below)***  |
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| ***(5 PTS)*** **Factor 2*(clear and concise response below)***  |
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|  |
| ***(10 PTS)*** Describe how your “***Secondary or Primary Prevention***” services have been delivered to survivors/clients during the past 12 months. Response should include activities/tasks, projects, timeline/frequency and/or timeframes.***(clear and concise response below)***  |
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|  |
| ***Domestic Violence Service Plan*** ***(If applicable to your service delivery)******Remember that you can only choose and respond to one of the three categories******Specialized, Prevention, or Domestic Violence*** |
| Provide the (District Court) Judicial District # (respond below)You can determine your district by accessing the link below<https://www.nccourts.gov/assets/documents/publications/District-Court-Districts-Map-20190101_0.pdf?UOFTutPx_lbpdzdkaWvCbchTMF59u4n_> |
| Type Judicial District # here: XXX |
|  |
| Does your program provide shelter services |
| Type “Yes” or “No” here: YES or NO |
|  |
| If your service delivery includes "shelter services", indicate if you have a "brick and mortar" shelter (respond below) |
| Yes, our program has a "brick and mortar" shelter(s) ORNo, our program does not have a "brick and mortar" shelter |
|  |
| If you indicated "yes" to question above, provide the number of "brick and mortar" shelters (respond below) |
| **PROVIDE THE # OF SHELTERS HERE** |
|  |
| ***(20 PTS)*** Provide details on how your program provides support and/or services to survivors in the following categories:* **Safety planning- 5 pts**
* **Crisis counseling -5 pts**
* **Legal advocacy- 5pts**
* **Resource information and referral- 5 pts**

***(clear and concise response below)***  |
| ***(5 PTS)*** **Safety planning *(clear and concise response below)*** |
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| ***(5 PTS)*** **Crisis counseling *(clear and concise response below)*** |
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| ***(5 PTS)*** **Legal advocacy (*clear and concise response below)*** |
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| ***(5 PTS)*** **Resource information and referral (*clear and concise response below)*** |
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|  |
| **Service challenges and barriers****(This section of the application should be completed by ALL Applicants)** |
| Review the service challenges below and choose at least one (1) service challenge impacting your **“Domestic Violence” or** **“Specialized” or “Prevention” service** program’s client/survivor’s service needs. You must state two (2) **specific barriers** that impact the service challenge you have chosen below  |
| **Service Challenges:** |
| * Immigration Status service challenge
 |
| * Sexual orientation/Gender identity service challenge
 |
| * Age: Youth and children service challenge
 |
| * Age: Adults in later life service challenge
 |
| * Geographic location service challenge (specify the geographic needs)
 |
| * Physical, cognitive-mental illness or sensory disability service challenge
 |
| * Faith, spirituality, or religious identity
 |
| * Sovereignty /Indigenous Status
 |
| * Culturally Specific communities due to Ethnicity or Cultural, language and literacy barriers
 |
| * Other unmet needs (may include transient survivors/clients)-please specify
 |
|  |
| Choose one (1) service challenge and state two (2) specific barriers that impact your chosen service challenge and explain how the barriers were determined. ***(clear and concise response below)***  |
|  |
| Service challenge ***(state below)*** |
| ***EXAMPLE RESPONSE*****Physical, cognitive-mental illness or sensory disability service challenge** |
|  |
| #1barrier + determining factors ***(clear and concise response below)***  |
| ***CHARACTER LIMIT EXAMPLE******FVPSA is a federal funding source to assist with ending domestic violence-intimate partner violence. The North Carolina Council for Women and Youth Involvement administers the FVPSA Program which serves as the primary federal funding stream dedicated to the support of emergency shelter and related assistance for victims of domestic violence and their children.*** ***The NC FVPSA grant program is funded by the U.S. Department of Health and Human Services Administration for Children and Families.*** ***FVPSA is committed to providing high quality, efficient, and effective sub-recipient customer service through guidance, support services, collaboration, compliance, and technical expertise during the life of the grant. Our success relies upon the success of our grantees in providing services to communities across the state and in complying with all federal and state guidelines.*** ***FVPSA has an ongoing focus on economic empowerment and increasing access to services and increasing inclusion to Tribal communities, culturally specific communities while also focusing on trauma-informed care services, language access services, mental health access services, accessible transportation services to citizens across North Carolina. FVPSA’s present initiatives, as they align with the NC DV Advocates Needs Assessment, include increasing access to services for unserved, underserved, or inadequately served communities, including survivors experiencing substance use disorders and other mental illness, survivors experiencing transportation, food, housing, employment, other forms of socioeconomic security, and survivors experiencing financial abuse.******FVPSA continues to coordinate statewide improvements within local communities, social service systems, and programming regarding the prevention and intervention of family violence, domestic violence, and teen dating violence through the leadership of the State Administrator and the Domestic Violence Coalition.*** |
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|  |
| #2- barrier + determining factors ***(clear and concise response below)***  |
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|  |
| ***(10 PTS)*** Describe how FVPSA funds will be used for ***intentional service delivery and outreach activities*** to address the selected “service challenge” ***(clear and concise response below)*** |
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| **Unique Program Accomplishments and Highlights** |
| ***(5 PTS***) This section will allow you to share information about your program’s unique accomplishments and/or highlights ***that have not been stated*** in other sections of this application.*Something to consider in your response: innovative and inclusive approaches to outreach, service delivery, and community collaboration** *innovative and effective practices for serving marginalized populations (including survivors)*
* *enhanced capacity building for serving marginalized populations (including survivors)*
* *increased family violence awareness*
* *engagement in coordination of services among community partners*
* *collaborative initiatives to reduce incidents of family violence*

Provide any unique accomplishments and/or highlights about your program's service delivery in the community***(clear and concise response below)*** |
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| **Verification and Acknowledgement of Terms** |
|  |
| We have reviewed and verified the information provided and acknowledge the termsThe Governing Board/Equivalent has been made aware of the information and terms associated with this project. The Governing Board/Equivalent was made aware on the date below and it was communicated by one of more of the following formats: email, letter, virtual meeting, conference call, individual phone call, other-specify.***(respond below)*** |
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|  |
| Executive Director or Equivalent’s **Printed Name below** |
| **PROVIDE THE NAME HERE** |
| Executive Director or Equivalent’s **Email address below** |
| **Email address here** |
|  |
| Governing Board Chair or Equivalent’s **Printed Name below** |
| **PROVIDE THE NAME HERE** |
| Governing Board Chair or Equivalent’s **Email address below** |
| **Email address here**  |

* If you have completed this preparation tool, you should have 90% of the grant application information ready for submission
* FVPSA staff will not accept multiple versions of the application.
* Be sure to review your application prior to submission.
* Multiple submissions of the application will deem you ineligible for consideration for funding
* Be sure to have your contact information added to the FVPSA service account
* Send your name and title + name of your program + contact email + contact number to: NCFVPSA@DOA.NC.GOV