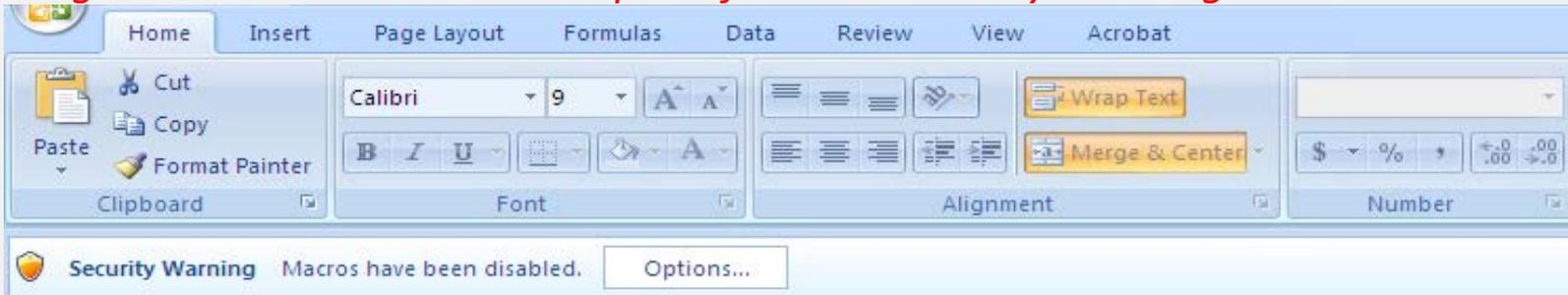


CTAS Budget Detail Worksheet FY14

Worksheet Instructions

Note: This document requires macros be enabled to work properly. Please ensure that macros are enabled before entering any data. You may be able to enable macros by choosing the "Enable this content" option from the Security Warning Ribbon above.



If the ribbon is not visible you may have been prompted to enable macros when you opened the document as pictured here. If you elected to disable macros,

please close the document and reopen it with macros enabled.



Purpose:

Budget Sheet Instructions

The Budget Detail Worksheet is provided for your use in the preparation of the budget and budget narrative. All required information (including the budget narrative) must be provided. Funds may not be budgeted in the shaded categories under each purpose area. Indicate any non-federal (matching) amount in the appropriate category, if applicable.

How to use this Workbook:

This workbook has been made available to CTAS applicants so that they can provide budgetary information for each Purpose Area they are applying for. It is a required document and must be completed and uploaded to the Grant Management System (GMS) as an attachment to your application. The workbook includes three different worksheets. The first worksheet (this one) is an instruction sheet; the second worksheet includes the Purpose Area specific budget detail worksheet and narrative and each must be filled out if the applicant is applying for that specific Purpose Area. If an application is not being submitted for a particular Purpose Area, no action on the budget worksheet is required. The last worksheet is a Budget Summary. It compiles all of the relevant budget information for all Purpose Areas into a single location and should be reviewed for correctness before the workbook is uploaded to the GMS application.

Step by Step Usage:

1. Please read and print this instruction page. It can be used as a reference while completing the rest of the document.
2. A purpose area index for this workbook has been created for your convenience. Clicking on the link for each Purpose Area will take you directly to that tab in this document.
3. Complete this document by selecting the relevant Purpose Area tabs for which funds are being requested and entering the budget detail information in the boxes.
4. Not all Purpose Areas require Non-Federal Contributions (match). The Purpose Areas that do require match are noted on their respective tabs and further details about the match calculation can be found there.
5. A budget narrative section is provided to you for each category within the worksheet. This is where your justification and/or linkages to the program narrative may be entered.
6. A Budget Summary is automatically calculated for you on the last worksheet. **Note:** Any errors detected on this page should be fixed on the Purpose Area specific tab.

Contact Information

Technical Assistance: For technical assistance with submitting an application, contact the Grants Management System Support Hotline at 1-888-549-9901, option 3, or via e-mail to GMSHelpDesk@usdoj.gov. The GMS Support Hotline is available Monday-Friday (except U.S. federal government holidays) from 6:00 a.m. to 12:00 midnight, Eastern Time.

Programmatic Assistance: For programmatic and general assistance with the requirements of this solicitation, contact the Response Center at 1-800-421-6770 or by e-mail at tribalgrants@usdoj.gov. The Response Center's hours of operation are Monday-Friday (except U.S. federal government holidays) from 9:00 a.m. to 5:00 p.m. Eastern Time. The Response Center will remain open on the solicitation closing date until 9:00 p.m. Eastern Time.

Purpose Area Index:

PA (#)	Name	Program Office	CFDA #
Demographics Form	CTAS Demographic Form		
1	Public Safety and Community Policing	COPS	16.710
2	Comprehensive Tribal Justice Systems Strategic Planning	BJA	16.608
3	Justice Systems and Alcohol and Substance Abuse	BJA	16.608
4	Corrections and Correctional Alternatives	BJA	16.596

Budget Sheet Instructions

5	Violence Against Women Tribal Governments Program	OVW	16.587
6	Children's Justice Act Partnerships for Indian Communities	OVC	16.582
7	Comprehensive Tribal Victim Assistance Program	OVC	16.582
8	Tribal Juvenile Accountability Discretionary Program	OJJDP	16.731
9	Tribal Youth Program	OJJDP	16.731
	Budget Summary		
Budget Category Descriptions:			
<i>Personnel</i>	List each position by title and name of employee, if available. Show the annual salary rate and the percentage of time to be devoted to the project. Compensation paid for employees engaged in grant activities must be consistent with that paid for similar work within the applicant organization. In the budget narrative, include a description of the responsibilities and duties of each position in relationship to fulfilling the project goals and objectives. All requested information must be included in the budget detail worksheet and budget narrative.		
<i>Fringe Benefits</i>	Fringe benefits should be based on actual known costs or an approved negotiated rate by a Federal agency. If not based on an approved negotiated rate, list the composition of the fringe benefit package. Fringe benefits are for the personnel listed in the budget category (A) and only for the percentage of time devoted to the project. All requested information must be included in the budget detail worksheet and budget narrative.		
<i>Travel</i>	Itemize travel expenses of staff personnel (e.g. staff to training, field interviews, advisory group meeting, etc.). Describe the purpose of each travel expenditure in reference to the project objectives. Show the basis of computation (e.g., six people to 3-day training at \$X airfare, \$X lodging, \$X subsistence). In training projects, travel and meals for trainees should be listed separately. Show the number of trainees and the unit costs involved. Identify the location of travel, if known; or if unknown, indicate "location to be determined." Indicate whether applicant's formal written travel policy or the Federal Travel Regulations are followed. Note: Travel expenses for consultants should be included in the "Contractual/Consultant" category. For each Purpose Area applied for, the budget should include the estimated cost for travel and accommodations for two staff to attend two three-day long meetings, with one in Washington D.C. and one in their region. All requested information must be included in the budget detail worksheet and budget narrative.		
<i>Equipment</i>	List non-expendable items that are to be purchased (Note: Organization's own capitalization policy for classification of equipment should be used). <u>Expendable</u> items should be included in the "Supplies" category. Applicants should analyze the cost benefits of purchasing versus leasing equipment, especially high cost items and those subject to rapid technological advances. Rented or leased equipment costs should be listed in the "Contractual" category. In the budget narrative, explain how the equipment is necessary for the success of the project, and describe the procurement method to be used. All requested information must be included in the budget detail worksheet and budget narrative.		
<i>Supplies</i>	List items by type (office supplies, postage, training materials, copy paper, and expendable equipment items costing less than \$5,000, such as books, hand held tape recorders) and show the basis for computation. Generally, supplies include any materials that are expendable or consumed during the course of the project. All requested information must be included in the budget detail worksheet and budget narrative.		

Budget Sheet Instructions

<i>Construction</i>	Provide a description of the construction project and an estimate of the costs. Construction costs are only allowed for Purpose Area #4. Minor repairs or renovations may be allowable in other Purpose Areas and should be classified in the "Other" category. Consult with the program office before budgeting funds in this category. All requested information must be included in the budget detail worksheet and budget narrative.
<i>Consultants/Contracts</i>	Indicate whether the applicant's formal, written Procurement Policy or Federal Acquisition Regulations are followed. Contracts: Provide a description of the product or service to be procured by contract and an estimate of the cost. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100,000. Consultant Fees: For each consultant enter the name, if known, service to be provided, hourly or daily fee (8-hour day), and estimated time on the project. Consultant fees in excess of \$450 per day (\$550 per day for Purpose Area 1 with the COPS Office) require additional justification and prior approval from OJP or the COPS office. All requested information must be included in the budget detail worksheet and budget narrative.
<i>Other Costs</i>	List items (e.g., rent, reproduction, telephone, janitorial or security services, and investigative or confidential funds) by type and the basis of the computation. For example, provide the square footage and the cost per square foot for rent, or provide a monthly rental cost and how many months to rent. All requested information must be included in the budget detail worksheet and budget narrative.
<i>Indirect Costs</i>	Indirect costs are allowed only if the applicant has a federally approved indirect cost rate. A copy of the rate approval, (a fully executed, negotiated agreement), must be attached. If the applicant does not have an approved rate, one can be requested by contracting the applicant's cognizant Federal agency, which will review all documentation and approve a rate for the applicant organization, or if the applicant's accounting system permits, costs may be allocated in the direct costs categories. All requested information must be included in the budget detail worksheet and budget narrative.

Demographic Form

Please fill out this form in its entirety. Note that each subsection has individual instructions. Please read them carefully before filling out this form. If you are applying as a consortium please aggregate the data for all the Tribes represented in your application.

I. Tribe Information

1. The name of each federally-recognized Indian Tribe that will be served by the proposed project(s):

Name(s)

The name(s) of your tribe and represented tribes.

BIA Region(s)

Your BIA Region(s)

2. What is the Tribe's current enrollment?

3. Of your current enrollment, what is the Tribe's total number of unemployed 18 years and over?

4. Of your current enrollment, what is the Tribe's total number of under-employed (below the poverty line) 18 years and over?

5. Of your current enrollment, what is the Tribe's total number of employed 18 years and over?

6. What is the current local population base?

7. Please enter the approximate square mileage of the reservation/jurisdiction to be served: (sq. miles)

8. Please check the crime victim population area(s) that best describe the services the Tribe typically supports.

- | | |
|---|---|
| <input type="checkbox"/> Abused or neglected children | <input type="checkbox"/> Stalking |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Survivors of homicide |
| <input type="checkbox"/> Elder Abuse | <input type="checkbox"/> Survivors of attempted homicide and/or assault |
| <input type="checkbox"/> Gang Violence | <input type="checkbox"/> Motor vehicle homicide |
| <input checked="" type="checkbox"/> Rape/sexual assault | <input type="checkbox"/> Human trafficking |
| <input type="checkbox"/> School violence | <input type="checkbox"/> Hate/bias crimes |
| <input type="checkbox"/> Juvenile crime, including bullying | <input type="checkbox"/> Financial crime/identity theft |
| <input type="checkbox"/> Property crime | <input type="checkbox"/> Victims with disabilities |

9. Have you applied for a CTAS grant before?

Yes No

If yes, what year?

2010

2011

2012

2013

10. Please provide your status as an applicant (check all that apply):

- Tribe
- Tribal Coalition
- Tribal Consortia
- Non-profit organization
- Other (please describe)

a. If you selected Tribal Coalition or Tribal Consortia please list the tribes you represent:

b. If you selected Non-profit organization describe the nature of you services and whom you provide them.

11. Please indicate if your agree with the following statement: The tribe(s)submitting this application consider themselves to be remotely located with respect to availability of justice or other relevant community services.

Yes No

If you selected “Yes”, please provide a brief statement that explains your selection. Examples might include “For a majority of our tribal community, law enforcement resource centers are greater than 1 hour’s drive away.” Or “Our tribal community has no resident medical facilities and the nearest public health center is operated by the City/Town of XXX which is not within tribal lands and not easily reached.”

II. Property/Violent Crime

Using the most recent available data and to the best of your ability using the UCR crime definitions, enter the actual number of incidents reported to your Tribe for the following crime types. Note that only those incidents for which your Tribe had primary response authority should be provided.

UCR Data *	
Year	
Criminal Homicide	
Forcible Rape	
Robbery	
Aggravated Assault	
Burglary	
Larceny (except motor vehicle theft)	
Motor Vehicle Theft	

***Note:** If your Tribe is not using UCR data or reports to NIBRS, please explain the source or methods used to report your crime data. If you do not report crime incidents at all please explain why you are unable to provide such data. If instructions are needed on converting your data to UCR Summary Data style please view the COPS Application Guide of the FBI's UCR Handbook (www.fbi.gov/ucr/handbook/ucrhandbook04.pdf) for more information.

III. Tribal Law Enforcement Information

Please answer the following questions. NOTE: If you choose "none" for question 1 you are finished completing this section and do not need to answer 1a or 1b.

1. What law enforcement agency or departments does your Tribe operate? (check all that apply):

- Tribal Police Department
- Department of Natural Resources
- Department of Fish and Wildlife
- Other (please describe):
- None

a. What is the actual population your department serves as the primary law enforcement agency entity?

This may or may not be the same as the population reported in the U.S. Census, the Tribe's current enrollment or the local population base. A Tribe with primary law enforcement authority is defined as having first responder responsibility to calls for service for all types of criminal incidents within its jurisdiction.

b. Enter the current Fiscal Year Actual Sworn Force Strength as of the date of this application:

The actual number of sworn officer positions is the actual number of sworn positions employed by your Tribe as of the date of this application. Do not include funded but currently vacant positions or unpaid positions. NOTE: For Tribes with multiple component law enforcement departments (e.g. Department of Public Safety and Fish and Wildlife Department), please report cumulative, full- and part-time sworn-force strength number for all law enforcement departments in your Tribe which would receive funding through this request if awarded.

Full-Time:

Part-Time:

IV. Tribal Facilities, Capacities and Capabilities

1. Telecommunications and Technology

a. Describe your Internet Access:

- Greater than 1Mbps (typically high speed broadband or T1 dedicated service)
- Between 1Mbps and 56Kbps (typically DSL or low rate broad band cable)
- Less than 56kbps (typically dial-up)
- ..

None

b. What types of communication services are generally available to the tribe at large and/or the tribe's justice components? (check all that apply)

	Tribe	Justice
i. Land Line (telephone, dial-up service)	<input type="checkbox"/>	<input type="checkbox"/>
ii. Cellular (telephone, data, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
iii. Satellite - Receive only (broadcasting services)	<input type="checkbox"/>	<input type="checkbox"/>
iv. Satellite - 2-way (2-way voice and data and well as broadcasting)	<input type="checkbox"/>	<input type="checkbox"/>
v. Radio services - (HF, VHF, UHF)	<input type="checkbox"/>	<input type="checkbox"/>
vi. Point to Point Microwave	<input type="checkbox"/>	<input type="checkbox"/>
vii. Other (please describe)		

Tribal

Justice Comp.

2. Facilities and Services (check all that apply)

Applicants should check and provide data for all the facilities and services located within the reservation/jurisdiction described in question 8 above.

<input type="checkbox"/> Hospital(s)	# of beds	<input type="text"/>
<input type="checkbox"/> Medical Clinic(s)	# of facilities	<input type="text"/>
<input type="checkbox"/> Mental Health Treatment Facilities (general)	# of facilities	<input type="text"/>
<input type="checkbox"/> Alcohol and Substance Abuse treatment facilities	# of facilities	<input type="text"/>
<input type="checkbox"/> Court(s)	# of facilities	<input type="text"/>
<input type="checkbox"/> Detention Facilities (Adult)	# of beds	<input type="text"/>
<input type="checkbox"/> Detention Facilities (Youth/Juvenile)	# of beds	<input type="text"/>
<input type="checkbox"/> Domestic Violence Shelters and/or Transitional	# of facilities	<input type="text"/>
<input type="checkbox"/> Recreational Youth Facilities	# of facilities	<input type="text"/>
<input type="checkbox"/> Counseling Youth Facilities	# of facilities	<input type="text"/>
<input type="checkbox"/> Re-Entry Facilities/Halfway Houses	# of facilities	<input type="text"/>

Public Safety and Community Policing

Purpose Area (1)

Program Office

COPS

16.710

Note: Non-Federal match is not required for this purpose area but can be provided if desired.

A. Personnel, B. Fringe Benefits

Add Sworn Position

Add Civilian Position

Delete Selected Position

	Total Cost	Non-Federal Contribution	Total
Personnel Salary Total	\$0	\$0	\$0
Personnel Fringe Total	\$0	\$0	\$0
Personnel Grand Total	\$0	\$0	\$0

C. Travel

Event Title <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	Location <i>Indicate the location of the event</i>	Type of Expense <i>Registration, Hotel, airfare, per diem</i>	Computation <i>Compute the cost of each type of expense X the number of people traveling.</i>								
Add Travel Expense		Delete Travel Expense		Location	Type of Expense	Cost	Duration or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
Total							\$0	\$0	\$0		

D. Equipment

Item <i>List and describe each item of equipment that will be purchased</i>	Computation <i>Compute the cost (e.g., the number of each item to be purchased X the cost per item)</i>				
Add Equipment	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
Total			\$0	\$0	\$0

E. Supplies

Supply Items <i>Provide a list of the types of items to be purchased with grant funds.</i>	Computation <i>Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.</i>				
Add Supply Item	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request

Purpose Area #1

Total	\$0	\$0	\$0
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F. Construction

G. Consultants/Contracts

Contracts

Provide a cost estimate for the product or service to be procured by contract

Item	Computation		
<i>Provide a description of the producer or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100.00</i>	<i>Compute the cost (e.g Cost-Non-Federal Contribution)</i>		
<input type="button" value="Add Item"/>	Total Cost	Non-Federal Contribution	Federal Request
Total	\$0	\$0	\$0

Consultant Fees

For each consultant enter the name (if known), service to be provided, hourly or daily fee (based upon an 8-hour day), and estimated length of time on the project.

Consultant Name/Title	Consultant Services Provided	Computation				
<input type="button" value="Add Fee"/>		Daily Rate	Number of Days	Total Cost	Non-Federal Contribution	Federal Request
Total				\$0	\$0	\$0

Consultant Travel

List all travel-related expenses to be paid from the grant to the individual consultants (e.g., transportation, meals, lodging) separate from their consultant fees.

Event Title	Location	Type of Expense	Computation					
<i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	<i>Indicate the location of the event</i>	<i>Hotel, airfare, per diem</i>	<i>Compute the cost of each type of expense X the number of people traveling.</i>					
<input type="button" value="Add Travel Expense"/>	<input type="button" value="Delete Travel Expense"/>		Cost	Duration or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
Total						\$0	\$0	\$0

Consultant Expenses

List all expenses to be paid from the grant to the individual consultants separate from their consultant fees and travel expenses (e.g., computer equipment and office supplies).

Consultant Name/Title	Item	Computation			
<input type="button" value="Add Expense"/>		Cost	Total Cost	Non-Federal Contribution	Federal Request
Total			\$0	\$0	\$0

H. Other Costs

Description

Purpose Area #1

<i>List and describe items that will be paid with grants funds.</i>						
<input type="text" value="Add Item"/>				Total Cost	Non-Federal Contribution	Federal Request
Total				\$0	\$0	\$0
I. Indirect Costs						
Description <i>Describe what the approved rate is and how it is applied.</i>		Computation <i>Compute the indirect costs for those portions of the program which allow such costs.</i>				
<input type="text" value="Add Indirect Costs"/>		Base	Indirect Cost Rate	Total Cost	Non-Federal Contribution	Federal Request
Total				\$0	\$0	\$0

Comprehensive Tribal Justice Systems Strategic Planning

Purpose Area (2)

Program Office **BJA** **16.608**

Note: Non-Federal match is not required for this purpose area but can be provided if desired.

A. Personnel

Name/Position <small>List each position and name, if known. New positions may be grouped by type.</small>	Computation <small>Show annual salary rate & amount of time devoted to the project for each name/position.</small>							
	# of Positions	Salary	Rate	Time Worked <small>(# of hours, days, months, years)</small>	%	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total(s)						\$0	\$0	\$0

Narrative

B. Fringe Benefits

Type of Benefit <small>List each grant-support fringe benefit that is provided to the grant-funded position.</small>	Computation <small>Show the basis for computation.</small>				
				Non-Federal	Federal

Purpose Area #2

		<i>Base</i>	<i>Rate</i>	<i>Total Cost</i>	<i>Contribution</i>	<i>Request</i>		
				\$0		\$0		
Total				\$0	\$0	\$0		
Narrative								
C. Travel								
Purpose of Travel	Location	Type of Expense	Computation					
<i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	<i>Indicate the travel destination.</i>	<i>Hotel, airfare, per diem</i>	<i>Compute the cost of each type of expense X the number of people traveling.</i>					
			<i>Cost</i>	<i>Duration or Distance</i>	<i># of Staff</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #2

D. Equipment					
Item	Computation				
<i>List and describe each item of equipment that will be purchased</i>	<i>Compute the cost (e.g., the number of each item to be purchased X the cost per item)</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0
Narrative					

Purpose Area #2

E. Supplies

Supply Items <i>Provide a list of the types of items to be purchased with grant funds.</i>	Computation <i>Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #2

F. Construction						
List of Construction Activities <i>List and describe each item that is part of construction.</i>		Computation <i>Compute the costs (e.g., the number of each item to be purchased X the cost per item)</i>				
		# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
N/A				\$0		\$0
Total				\$0	\$0	\$0
Narrative						
G. Consultants/Contracts						
Item <i>Provide a description of the producer or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100.00</i>						
				Total Cost	Non-Federal Contribution	Federal Request
						\$0
Purpose of Travel <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	Location <i>Indicate the travel destination.</i>	Type of Expense <i>Hotel, airfare, per diem</i>	Computation <i>Compute the cost of each type of expense X the number of people traveling.</i>			
			Duration	# of	Non-Federal	Federal

Purpose Area #2

			Cost	or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								
H. Other Costs								
Description								
<i>List and describe items that will be paid with grants funds.</i>								
						Total Cost	Non-Federal Contribution	Federal Request
								\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #2

I. Indirect Costs

Description <i>Describe what the approved rate is and how it is applied.</i>	Computation <i>Compute the indirect costs for those portions of the program which allow such costs.</i>				
	<i>Base</i>	<i>Indirect Cost Rate</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #2



Justice Systems and Alcohol and Substance Abuse

Purpose Area (3)

Program Office **BJA** 16.608

Note: Non-Federal match is not required for this purpose area but can be provided if desired.

A. Personnel

Name/Position <small>List each position and name, if known. New positions may be grouped by type.</small>	Computation <small>Show annual salary rate & amount of time devoted to the project for each name/position.</small>							
	# of Positions	Salary	Rate	Time Worked <small>(# of hours, days, months, years)</small>	%	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total(s)						\$0	\$0	\$0

Narrative

B. Fringe Benefits

Type of Benefit <small>List each grant-support fringe benefit that is provided to the grant-funded position.</small>	Computation <small>Show the basis for computation.</small>				
				Non-Federal	Federal

Purpose Area #3

		<i>Base</i>	<i>Rate</i>	<i>Total Cost</i>	<i>Contribution</i>	<i>Request</i>		
				\$0		\$0		
Total				\$0	\$0	\$0		
Narrative								
C. Travel								
Purpose of Travel	Location	Type of Expense	Computation					
<i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	<i>Indicate the travel destination.</i>	<i>Hotel, airfare, per diem</i>	<i>Compute the cost of each type of expense X the number of people traveling.</i>					
			<i>Cost</i>	<i>Duration or Distance</i>	<i># of Staff</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #3

D. Equipment					
Item	Computation				
<i>List and describe each item of equipment that will be purchased</i>	<i>Compute the cost (e.g., the number of each item to be purchased X the cost per item)</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0
Narrative					

Purpose Area #3

E. Supplies

Supply Items <i>Provide a list of the types of items to be purchased with grant funds.</i>	Computation <i>Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #3

F. Construction						
List of Construction Activities <i>List and describe each item that is part of construction.</i>		Computation <i>Compute the costs (e.g., the number of each item to be purchased X the cost per item)</i>				
		# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
N/A				\$0		\$0
Total				\$0	\$0	\$0
Narrative						
G. Consultants/Contracts						
Item <i>Provide a description of the producer or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100.00</i>						
				Total Cost	Non-Federal Contribution	Federal Request
						\$0
Purpose of Travel <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	Location <i>Indicate the travel destination.</i>	Type of Expense <i>Hotel, airfare, per diem</i>	Computation <i>Compute the cost of each type of expense X the number of people traveling.</i>			
			Duration	# of	Non-Federal	Federal

Purpose Area #3

			<i>Cost</i>	<i>or</i> <i>Distance</i>	<i># of</i> <i>Staff</i>	<i>Total Cost</i>	<i>Non-Federal</i> <i>Contribution</i>	<i>Federal</i> <i>Request</i>
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								
H. Other Costs								
Description								
<i>List and describe items that will be paid with grants funds.</i>								
						Total Cost	Non-Federal Contribution	Federal Request
								\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #3

I. Indirect Costs

Description <i>Describe what the approved rate is and how it is applied.</i>	Computation <i>Compute the indirect costs for those portions of the program which allow such costs.</i>				
	<i>Base</i>	<i>Indirect Cost Rate</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #3



Corrections and Correctional Alternatives

Purpose Area (4)

Program Office

BJA

16.596

Note: Non-Federal match is not required for this purpose area but can be provided if desired.

A. Personnel

Name/Position <i>List each position and name, if known. New positions may be grouped by type.</i>	Computation <i>Show annual salary rate & amount of time devoted to the project for each name/position.</i>							
	# of Positions	Salary	Rate	Time Worked (# of hours, days, months, years)	%	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total(s)						\$0	\$0	\$0

Narrative

B. Fringe Benefits

Type of Benefit <i>List each grant-support fringe benefit that is provided to the grant-funded position.</i>	Computation <i>Show the basis for computation.</i>				
				Non-Federal	Federal

Purpose Area #4

		<i>Base</i>	<i>Rate</i>	<i>Total Cost</i>	<i>Contribution</i>	<i>Request</i>		
				\$0		\$0		
Total				\$0	\$0	\$0		
Narrative								
C. Travel								
Purpose of Travel	Location	Type of Expense	Computation					
<i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	<i>Indicate the travel destination.</i>	<i>Hotel, airfare, per diem</i>	<i>Compute the cost of each type of expense X the number of people traveling.</i>					
			<i>Cost</i>	<i>Duration or Distance</i>	<i># of Staff</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #4

D. Equipment					
Item	Computation				
<i>List and describe each item of equipment that will be purchased</i>	<i>Compute the cost (e.g., the number of each item to be purchased X the cost per item)</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0
Narrative					

Purpose Area #4

E. Supplies

Supply Items <i>Provide a list of the types of items to be purchased with grant funds.</i>	Computation <i>Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #4

F. Construction						
List of Construction Activities <i>List and describe each item that is part of construction.</i>		Computation <i>Compute the costs (e.g., the number of each item to be purchased X the cost per item)</i>				
		# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
				\$0		\$0
Total				\$0	\$0	\$0
Narrative						
G. Consultants/Contracts						
Item <i>Provide a description of the producer or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100.00</i>						
				Total Cost	Non-Federal Contribution	Federal Request
						\$0
Purpose of Travel <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	Location <i>Indicate the travel destination.</i>	Type of Expense <i>Hotel, airfare, per diem</i>	Computation <i>Compute the cost of each type of expense X the number of people traveling.</i>			
			Duration	# of	Non-Federal	Federal

Purpose Area #4

			Cost	or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								
H. Other Costs								
Description								
<i>List and describe items that will be paid with grants funds.</i>								
						Total Cost	Non-Federal Contribution	Federal Request
								\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #4

I. Indirect Costs

Description <i>Describe what the approved rate is and how it is applied.</i>	Computation <i>Compute the indirect costs for those portions of the program which allow such costs.</i>				
	<i>Base</i>	<i>Indirect Cost Rate</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #4



Violence Against Women Tribal Governments Program

Purpose Area (5)

Program Office

OVW

16.587

Note: Non-Federal match is not required for this purpose area but can be provided if desired.

A. Personnel

Name/Position <small>List each position and name, if known. New positions may be grouped by type.</small>	Computation <small>Show annual salary rate & amount of time devoted to the project for each name/position.</small>							
	# of Positions	Salary	Rate	Time Worked <small>(# of hours, days, months, years)</small>	%	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total(s)						\$0	\$0	\$0

Narrative

B. Fringe Benefits

Type of Benefit <small>List each grant-support fringe benefit that is provided to the grant-funded position.</small>	Computation <small>Show the basis for computation.</small>				
				Non-Federal	Federal

Purpose Area #5

		<i>Base</i>	<i>Rate</i>	<i>Total Cost</i>	<i>Contribution</i>	<i>Request</i>		
				\$0		\$0		
Total				\$0	\$0	\$0		
Narrative								
C. Travel								
Purpose of Travel	Location	Type of Expense	Computation					
<i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	<i>Indicate the travel destination.</i>	<i>Hotel, airfare, per diem</i>	<i>Compute the cost of each type of expense X the number of people traveling.</i>					
			<i>Cost</i>	<i>Duration or Distance</i>	<i># of Staff</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #5

D. Equipment					
Item	Computation				
<i>List and describe each item of equipment that will be purchased</i>	<i>Compute the cost (e.g., the number of each item to be purchased X the cost per item)</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0
Narrative					

Purpose Area #5

E. Supplies

Supply Items <i>Provide a list of the types of items to be purchased with grant funds.</i>	Computation <i>Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #5

F. Construction						
List of Construction Activities <i>List and describe each item that is part of construction.</i>		Computation <i>Compute the costs (e.g., the number of each item to be purchased X the cost per item)</i>				
		# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
N/A				\$0		\$0
Total				\$0	\$0	\$0
Narrative						
G. Consultants/Contracts						
Item <i>Provide a description of the producer or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100.00</i>						
				Total Cost	Non-Federal Contribution	Federal Request
						\$0
Purpose of Travel <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	Location <i>Indicate the travel destination.</i>	Type of Expense <i>Hotel, airfare, per diem</i>	Computation <i>Compute the cost of each type of expense X the number of people traveling.</i>			
			Duration	# of		

Purpose Area #5

			Cost	or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								
H. Other Costs								
Description								
<i>List and describe items that will be paid with grants funds.</i>								
						Total Cost	Non-Federal Contribution	Federal Request
								\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #5

I. Indirect Costs

Description <i>Describe what the approved rate is and how it is applied.</i>	Computation <i>Compute the indirect costs for those portions of the program which allow such costs.</i>				
	<i>Base</i>	<i>Indirect Cost Rate</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #5



Children's Justice Act Partnerships for Indian Communities

Purpose Area (6)

Program Office

OVC

16.582

Note: No more than 50% of the request amount can be used salary and fringe benefits. Non-Federal match is not required for this purpose area but can be provided if desired.

A. Personnel

Name/Position <small>List each position and name, if known. New positions may be grouped by type.</small>	Computation <small>Show annual salary rate & amount of time devoted to the project for each name/position.</small>							
	# of Positions	Salary	Rate	Time Worked <small>(# of hours, days, months, years)</small>	%	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total(s)						\$0	\$0	\$0

Narrative

B. Fringe Benefits

Type of Benefit <small>List each grant-support fringe benefit that is provided to the grant-funded position.</small>	Computation <small>Show the basis for computation.</small>

Purpose Area #6

		<i>Base</i>	<i>Rate</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>		
				\$0		\$0		
Total				\$0	\$0	\$0		
Narrative								
C. Travel								
Purpose of Travel	Location	Type of Expense	Computation					
<i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	<i>Indicate the travel destination.</i>	<i>Hotel, airfare, per diem</i>	<i>Compute the cost of each type of expense X the number of people traveling.</i>					
			<i>Cost</i>	<i>Duration or Distance</i>	<i># of Staff</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #6

D. Equipment					
Item	Computation				
<i>List and describe each item of equipment that will be purchased</i>	<i>Compute the cost (e.g., the number of each item to be purchased X the cost per item)</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0
Narrative					

Purpose Area #6

E. Supplies

Supply Items <i>Provide a list of the types of items to be purchased with grant funds.</i>	Computation <i>Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #6

F. Construction						
List of Construction Activities <i>List and describe each item that is part of construction.</i>		Computation <i>Compute the costs (e.g., the number of each item to be purchased X the cost per item)</i>				
		# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
N/A				\$0		\$0
Total				\$0	\$0	\$0
Narrative						
G. Consultants/Contracts						
Item <i>Provide a description of the producer or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100.00</i>						
				Total Cost	Non-Federal Contribution	Federal Request
						\$0
Purpose of Travel <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	Location <i>Indicate the travel destination.</i>	Type of Expense <i>Hotel, airfare, per diem</i>	Computation <i>Compute the cost of each type of expense X the number of people traveling.</i>			
			Duration	# of	Non-Federal	Federal

Purpose Area #6

			Cost	or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								
H. Other Costs								
Description								
<i>List and describe items that will be paid with grants funds.</i>								
						Total Cost	Non-Federal Contribution	Federal Request
								\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #6

I. Indirect Costs

Description <i>Describe what the approved rate is and how it is applied.</i>	Computation <i>Compute the indirect costs for those portions of the program which allow such costs.</i>				
	<i>Base</i>	<i>Indirect Cost Rate</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #6



Comprehensive Tribal Victim Assistance Program

Purpose Area (7)

Program Office OVC 16.582

Note: Non-Federal match is not required for this purpose area but can be provided if desired.

A. Personnel

Name/Position <small>List each position and name, if known. New positions may be grouped by type.</small>	Computation <small>Show annual salary rate & amount of time devoted to the project for each name/position.</small>							
	# of Positions	Salary	Rate	Time Worked <small>(# of hours, days, months, years)</small>	%	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total(s)						\$0	\$0	\$0

Narrative

B. Fringe Benefits

Type of Benefit <small>List each grant-support fringe benefit that is provided to the grant-funded position.</small>	Computation <small>Show the basis for computation.</small>				
				Non-Federal	Federal

Purpose Area #7

		<i>Base</i>	<i>Rate</i>	<i>Total Cost</i>	<i>Contribution</i>	<i>Request</i>		
				\$0		\$0		
Total				\$0	\$0	\$0		
Narrative								
C. Travel								
Purpose of Travel	Location	Type of Expense	Computation					
<i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	<i>Indicate the travel destination.</i>	<i>Hotel, airfare, per diem</i>	<i>Compute the cost of each type of expense X the number of people traveling.</i>					
			<i>Cost</i>	<i>Duration or Distance</i>	<i># of Staff</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #7

D. Equipment					
Item	Computation				
<i>List and describe each item of equipment that will be purchased</i>	<i>Compute the cost (e.g., the number of each item to be purchased X the cost per item)</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0
Narrative					

Purpose Area #7

E. Supplies

Supply Items <i>Provide a list of the types of items to be purchased with grant funds.</i>	Computation <i>Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #7

F. Construction						
List of Construction Activities <i>List and describe each item that is part of construction.</i>		Computation <i>Compute the costs (e.g., the number of each item to be purchased X the cost per item)</i>				
		# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
N/A				\$0		\$0
Total				\$0	\$0	\$0
Narrative						
G. Consultants/Contracts						
Item <i>Provide a description of the producer or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100.00</i>						
				Total Cost	Non-Federal Contribution	Federal Request
						\$0
Purpose of Travel <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	Location <i>Indicate the travel destination.</i>	Type of Expense <i>Hotel, airfare, per diem</i>	Computation <i>Compute the cost of each type of expense X the number of people traveling.</i>			
			Duration	# of	Non-Federal	Federal

Purpose Area #7

			Cost	or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								
H. Other Costs								
Description								
<i>List and describe items that will be paid with grants funds.</i>								
						Total Cost	Non-Federal Contribution	Federal Request
								\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #7

I. Indirect Costs

Description <i>Describe what the approved rate is and how it is applied.</i>	Computation <i>Compute the indirect costs for those portions of the program which allow such costs.</i>				
	<i>Base</i>	<i>Indirect Cost Rate</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #7



Tribal Juvenile Accountability Discretionary Program

Purpose Area (8)

Program Office

OJJDP

16.731

A. Personnel

Name/Position <small>List each position and name, if known. New positions may be grouped by type.</small>	Computation <small>Show annual salary rate & amount of time devoted to the project for each name/position.</small>							
	# of Positions	Salary	Rate	Time Worked <small>(# of hours, days, months, years)</small>	%	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total(s)						\$0	\$0	\$0

Narrative

B. Fringe Benefits

Type of Benefit <small>List each grant-support fringe benefit that is provided to the grant-funded position.</small>	Computation <small>Show the basis for computation.</small>				
				Non-Federal	Federal

Purpose Area #8

		<i>Base</i>	<i>Rate</i>	<i>Total Cost</i>	<i>Contribution</i>	<i>Request</i>		
				\$0		\$0		
Total				\$0	\$0	\$0		
Narrative								
C. Travel								
Purpose of Travel	Location	Type of Expense	Computation					
<i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	<i>Indicate the travel destination.</i>	<i>Hotel, airfare, per diem</i>	<i>Compute the cost of each type of expense X the number of people traveling.</i>					
			<i>Cost</i>	<i>Duration or Distance</i>	<i># of Staff</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #8

D. Equipment					
Item	Computation				
<i>List and describe each item of equipment that will be purchased</i>	<i>Compute the cost (e.g., the number of each item to be purchased X the cost per item)</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0
Narrative					

Purpose Area #8

E. Supplies

Supply Items <i>Provide a list of the types of items to be purchased with grant funds.</i>	Computation <i>Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #8

			Cost	or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								
H. Other Costs								
Description								
<i>List and describe items that will be paid with grants funds.</i>								
						Total Cost	Non-Federal Contribution	Federal Request
								\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #8

I. Indirect Costs

Description <i>Describe what the approved rate is and how it is applied.</i>	Computation <i>Compute the indirect costs for those portions of the program which allow such costs.</i>				
	<i>Base</i>	<i>Indirect Cost Rate</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #8



Tribal Youth Program

Purpose Area (9)

Program Office

OJJDP

16.731

Note: Non-Federal match is not required for this purpose area but can be provided if desired.

A. Personnel

Name/Position <small>List each position and name, if known. New positions may be grouped by type.</small>	Computation <small>Show annual salary rate & amount of time devoted to the project for each name/position.</small>							
	# of Positions	Salary	Rate	Time Worked <small>(# of hours, days, months, years)</small>	%	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total(s)						\$0	\$0	\$0

Narrative

B. Fringe Benefits

Type of Benefit <small>List each grant-support fringe benefit that is provided to the grant-funded position.</small>	Computation <small>Show the basis for computation.</small>				
				Non-Federal	Federal

Purpose Area #9

		<i>Base</i>	<i>Rate</i>	<i>Total Cost</i>	<i>Contribution</i>	<i>Request</i>		
				\$0		\$0		
Total				\$0	\$0	\$0		
Narrative								
C. Travel								
Purpose of Travel	Location	Type of Expense	Computation					
<i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	<i>Indicate the travel destination.</i>	<i>Hotel, airfare, per diem</i>	<i>Compute the cost of each type of expense X the number of people traveling.</i>					
			<i>Cost</i>	<i>Duration or Distance</i>	<i># of Staff</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #9

D. Equipment					
Item	Computation				
<i>List and describe each item of equipment that will be purchased</i>	<i>Compute the cost (e.g., the number of each item to be purchased X the cost per item)</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0
Narrative					

Purpose Area #9

E. Supplies

Supply Items <i>Provide a list of the types of items to be purchased with grant funds.</i>	Computation <i>Describe the item and the compute the costs. Computation: The number of each item to be purchased X the cost per item.</i>				
	# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #9

F. Construction						
List of Construction Activities <i>List and describe each item that is part of construction.</i>		Computation <i>Compute the costs (e.g., the number of each item to be purchased X the cost per item)</i>				
		# of Items	Cost	Total Cost	Non-Federal Contribution	Federal Request
N/A				\$0		\$0
Total				\$0	\$0	\$0
Narrative						
G. Consultants/Contracts						
Item <i>Provide a description of the producer or services to be procured by contract and an estimate of the costs. Applicants are encouraged to promote free and open competition in awarding contracts. A separate justification must be provided for sole source contracts in excess of \$100.00</i>						
				Total Cost	Non-Federal Contribution	Federal Request
						\$0
Purpose of Travel <i>Indicate the purpose of each trip or type of trip (training, advisory group meeting)</i>	Location <i>Indicate the travel destination.</i>	Type of Expense <i>Hotel, airfare, per diem</i>	Computation <i>Compute the cost of each type of expense X the number of people traveling.</i>			
			Duration	# of	Non-Federal	Federal

Purpose Area #9

			Cost	or Distance	# of Staff	Total Cost	Non-Federal Contribution	Federal Request
						\$0		\$0
Total						\$0	\$0	\$0
Narrative								
H. Other Costs								
Description								
<i>List and describe items that will be paid with grants funds.</i>								
						Total Cost	Non-Federal Contribution	Federal Request
								\$0
Total						\$0	\$0	\$0
Narrative								

Purpose Area #9

I. Indirect Costs

Description <i>Describe what the approved rate is and how it is applied.</i>	Computation <i>Compute the indirect costs for those portions of the program which allow such costs.</i>				
	<i>Base</i>	<i>Indirect Cost Rate</i>	<i>Total Cost</i>	<i>Non-Federal Contribution</i>	<i>Federal Request</i>
			\$0		\$0
Total			\$0	\$0	\$0

Narrative

Purpose Area #9



Budget Summary

Budget Summary										
<i>Note: Any errors detected on this page should be fixed on the Purpose Area specific tab.</i>										
Budget Category	PA(1)	PA (2)	PA (3)	PA (4)	PA (5)	PA (6)	PA (7)	PA(8)	PA(9)	
	COPS	BJA	BJA	BJA	OVW	OVC	OVC	OJJDP	OJJDP	
	16.710	16.608	16.608	16.596	16.587	16.582	16.582	16.731	16.731	
	Public Safety and Community Policing	Comprehensive Tribal Justice Systems Strategic Planning	Justice Systems and Alcohol and Substance Abuse	Corrections and Correctional Alternatives	Violence Against Women Tribal Governments Program	Children's Justice Act Partnerships for Indian Communities	Comprehensive Tribal Victim Assistance Program	Tribal Juvenile Accountability Discretionary Program	Tribal Youth Program	Total(s)
A. Personnel	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B. Fringe Benefits	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C. Travel	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
D. Equipment	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E. Supplies	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
F. Construction	N/A	N/A	N/A	\$0	N/A	N/A	N/A	N/A	N/A	\$0
G. Consultants & Contracts	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
H. Other	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Direct Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
I. Indirect Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Project Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Up to 100% of total Project	Up to 100% of total Project	Up to 100% of total Project	Up to 100% of total Project	Up to 100% of total Project	Up to 100% of total Project	Up to 100% of total Project	Up to 90% of total project	Up to 100% of total Project	
Federal Request	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Non-Federal Contribution	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Required Match Met	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A