|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Grant Program:** | | | ***Pre and Post-Incarceration Services (PAPIS)*** | | | | | | **Congressional District(s)** | | | |  | |
| **Applicant:** | | |  | | | | | | **Faith Based Organization?** | | | | Yes  No | |
| **Applicant Federal ID Number:** | | |  | | | | | | **Best Practice?** | | | | Yes  No | |
| **Jurisdiction(s) Served:** | | |  | | | | | | | | | | | |
| **Program Title:** | | | \_\_\_ Community Corrections  \_\_\_ Pretrial Services | | | | | | **Certified Crime Prevention Community?** | | | | Yes  No | |
| **Grant Period:** | | | **July 1, 2018 – June 30, 2019** | | | | | | **DUNS NUMBER:** | | | |  | |
| **Type of Application:** | | | New  Continuation of Grant Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Revision of Grant Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | **Rural**  **Urban**  **Suburban** | | |
|  | | Project Director | | | | | Project Administrator | | | | Finance Officer | | | |
| **Name:** |  | | | | |  | | | |  | | | | |
| **Title:** |  | | | | |  | | | |  | | | | |
| **Address:**  **Include**  **Zip + 4** |  | | | | |  | | | |  | | | | |
| **Phone:** |  | | | | |  | | | |  | | | | |
| **Fax:** |  | | | | |  | | | |  | | | | |
| **E-Mail:** |  | | | | |  | | | |  | | | | |
| ***Signature of Project Administrator:*** | | | | | | | | | | | | | | |
| **Brief Project Description:** | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| **Project Budget** | | | | DCJS Funds | | | | **Local Match** | | | | | | Total Requested |
|  | | | | **Local Probation** | **Pretrial Services** | | |  | | | | | |  |
| Personnel | | | |  |  | | |  | | | | | |  |
| **Consultants** | | | |  |  | | |  | | | | | |  |
| Travel | | | |  |  | | |  | | | | | |  |
| Equipment | | | |  |  | | |  | | | | | |  |
| Supplies/Other | | | |  |  | | |  | | | | | |  |
| Indirect Costs | | | |  |  | | |  | | | | | |  |
| Total Requested | | | |  |  | | |  | | | | | |  |
| Local Funds | | | |  |  | | |  | | | | | |  |
| Fees | | | |  |  | | |  | | | | | |  |