

LOUISIANA COMMISSION ON LAW ENFORCEMENT
AND ADMINISTRATION OF CRIMINAL JUSTICE

APPLICATION AND REVIEW
SUMMARY

APPLICATION NUMBER: J10-5-ADM

APPLICANT: Capital District L.E.P.C., Inc.

PROJECT TITLE: Administrative Funds

PROJECT FUNDS :

FUND: \$ 2,340 50.00%
MATCH: \$ 2,340 50.00%
TOTAL: \$ 4,680 100.00%

PROJECT DURATION: 10 months

START DATE: 06/01/2011

END DATE: 03/31/2012

Continuation of J87-8-RP5

PROJECT SUMMARY:

Funds to assist the local regional planning unit to administer, support and accomplish the goals and objectives stated in the State's Three Year State Plan and its Updates and in accordance with the JJDP Act.

RECOMMENDATION: FUND X DENY

SPECIAL CONDITIONS :

1. AS A CONDITION OF RECEIVING FEDERAL PROGRAM ADMINISTRATIVE FUNDS, SUBGRANTEE CERTIFIES THAT ALL PROGRAMMATIC SUBGRANTS AWARDED BY LCLE THROUGH EACH LAW ENFORCEMENT PLANNING DISTRICT SHALL BE MONITORED IN ACCORDANCE WITH LCLE GUIDELINES.
2. ALL ADMINISTRATIVE FUNDS MUST BE USED EXCLUSIVELY FOR THE ADMINISTRATION OF THE FEDERAL PROGRAM IN WHICH IT IS AWARDED.



**LOUISIANA COMMISSION ON
LAW ENFORCEMENT
AND
ADMINISTRATION OF CRIMINAL JUSTICE**

APPLICATION FOR
SUBGRANT

JUVENILE JUSTICE
AND
DELINQUENCY
PREVENTION

CFDA# 16.540

FOR LCLE USE ONLY: Project ID: JJD-5-ADM Federal Purpose Area: 23

1. TITLE OF PROJECT ADMINISTRATIVE FUNDS	2. CONTINUATION OF SUBGRANT <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, list grant # J 09-5-ADM
3. PROJECT DURATION Total Length <u>12</u> Months (Not to Exceed 12 Months) Desired Starting Date <u>6/11/2011</u> Desired Completion Date <u>3/31/2012</u>	4. PROJECT FUNDS Federal Funding Year <u>06</u> Federal Funds Requested \$2,340 Cash Match \$2,340 Total Project Funds \$4,680
5. APPLICANT AGENCY Authorized Official: Chief Roddy Devall Title: Board President Agency Name: Capital District Law Enforcement Address 1: 1406 South Range Ave., Ste. 5 Address 2: City: Denham Springs Zip + 4 Code 70726 - 4801 Telephone #: (225) 667 - 1503 Fax #: (225) 667 - 1959 E-Mail: plnningc@bellsouth.net Federal Employer Tax ID #: 72-0743392	6. IMPLEMENTING AGENCY Authorized Official: Chief Roddy Devall Title: Board President Agency Name: Capital District Law Enforcement Address 1: 1406 South Range Ave., Ste. 5 Address 2: City: Denham Springs Zip + 4 Code 70726 - 4801 Telephone #: (225) 667 - 1503 Fax #: (225) 667 - 1959 E-Mail: plnningc@bellsouth.net
7. PROJECT DIRECTOR Name: Wanda Johnson Agency Name: Capital District Law Enforcement Address: 1406 South Range Ave., Ste. 5 City: Denham Springs Zip + 4 Code: 70726 - 4801 Telephone #: (225) 667 - 1503 Fax #: (225) 667 - 1959 Email: plnningc@bellsouth.net	8. FINANCIAL OFFICER Name: Mr. Jack Liuzza Agency Name: Capital District Law Enforcement Address: 1406 South Range Ave, Ste. 5 City: Denham Springs Zip + 4 Code: 70726 - 4801 Telephone #: (225) 667 - 1503 Fax #: (225) 667 - 1959 Email: plnningc@bellsouth.net
9. CONGRESSIONAL DISTRICT SERVED: <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7	
10. ARE PRE-AWARD COSTS REQUESTED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
11. BRIEF PROJECT DESCRIPTION:	

Funds to assist the local regional planning unit to administer, support, and accomplish the goals and objectives stated in the State's Three Year State Plan and its Updates and in accordance with the JJDP Act.

2011 SEP 27 PM 12:38
LA COMMISSION
LAW ENFORCEMENT

PROJECT BUDGET SUMMARY

Instructions: This page should be completed last. The Checklist is self-explanatory. Project Summary - Insert applicable budget category totals from the detailed Project Budget. Do not exceed space provided.

Checklist:	Yes No
Are all budgeted items allowable per Program Guidelines?	<input checked="" type="checkbox"/> <input type="checkbox"/>
Were instructions followed to determine allowable personnel/contractual costs?	<input checked="" type="checkbox"/> <input type="checkbox"/>
Are all line item computations correct?	<input checked="" type="checkbox"/> <input type="checkbox"/>
Have Category Totals been rounded to nearest dollar?	<input checked="" type="checkbox"/> <input type="checkbox"/>

Each category amount listed below must equal Category Totals shown.

Name of person completing budget section: Wanda Johnson

Phone Number: (225) 667 - 1503

Fax Number: (225) 667 - 1959

E-Mail Address: plnningc@bellsouth.net

Section Category	Federal Funds	Cash Match	Total Budget Item
Section 100. Personnel	\$750	\$750	\$1,500
Section 200. Fringe Benefits	\$0	\$0	\$0
Section 300. Travel	\$0	\$0	\$0
Section 400. Equipment	\$0	\$0	\$0
Section 500. Supplies	\$379	\$378	\$757
Section 600. Contractual	\$0	\$0	\$0
Section 800. Other Direct Costs	\$1,211	\$1,212	\$2,423
TOTAL PROJECT COSTS	\$2,340	\$2,340	\$4,680

BUDGET NARRATIVE

SECTION 100. PERSONNEL

Position Title & Employee Name	F - Full Time P - Part Time Employee	Hours Worked Weekly x Pay Rate	Monthly Salary	Actual Time Devoted to Project In Percentages	No. Of Months	Total Salary Paid By Grant	Paid With	
							F	C
Name: Wanda Johnson Title: Executive Director	F		2,531.24	4.94 %	12	\$1,500	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Name: Title:				%			<input type="checkbox"/>	<input type="checkbox"/>
Name: Title:				%			<input type="checkbox"/>	<input type="checkbox"/>
Category Total						\$1,500		

CATEGORY SUMMARY	
FEDERAL FUNDS	\$750
CASH MATCH	\$750
CATEGORY TOTAL	\$1,500

Attachments Included:

- Yes No
- A complete job description for each position requested
- A resume for each individual in positions already filled, including their education and experience. Resumes for those not filled must be submitted as soon as the individual is hired.

List each position on the previous page and explain the following:

- a. Need for each position shown;
A person to process JJDP applications, project requests, grant adjustment, etc. from various agencies.

- b. The basis for determining the salary of each position;
A portion of the salary as per the hours devoted toward this project.

- c. Project duties of each position requested.
Assist agencies who wish to apply for JJDP funds, assist agencies in writing applications, process paperwork relating to the applications such as request for funds, quarterly reports, grant adjustments, etc.

SECTION 200. FRINGE BENEFITS (Employer's Share)

For Project Personnel Only. Fringe Benefits cannot exceed 30% of salaries listed in Section 100. One retirement plan allowed. Indicate basis of determining rate or cost for each type listed, i.e., Social Security 6.2% of salary, life insurance at \$10/month, etc. In the "Type" column, identify position(s) for whom fringe costs are requested.

Type	Rate	Total	Paid With	
			F	C
SOCIAL SECURITY: Calculations:	6.2%		<input type="checkbox"/>	<input type="checkbox"/>
MEDICARE: Calculations:	1.45%		<input type="checkbox"/>	<input type="checkbox"/>
HEALTH/LIFE INSURANCE: Calculations:			<input type="checkbox"/>	<input type="checkbox"/>
WORKMAN'S COMPENSATION: Calculations:			<input type="checkbox"/>	<input type="checkbox"/>
UNEMPLOYMENT: Calculations:			<input type="checkbox"/>	<input type="checkbox"/>
PUBLIC/PRIVATE RETIREMENT: Calculations:			<input type="checkbox"/>	<input type="checkbox"/>
OTHER (Specify):			<input type="checkbox"/>	<input type="checkbox"/>
CATEGORY TOTAL		\$0		

CATEGORY SUMMARY	
FEDERAL FUNDS	\$0
CASH MATCH	\$0
CATEGORY TOTAL	\$0

- Check below, if applicable:
- All fringe benefits will be paid by the applicant agency.
- Additional fringe benefits will be paid by the applicant agency.

SECTION 500. SUPPLIES

List all other supplies, including office supplies (pens, pencils, paper, etc.), postage, blank cassette tapes, student supplies, etc. If office supplies average \$50 per month or less (\$600 maximum amount for a 12-month grant period), do not itemize items. List as "Basic Supply Allowance" under "Type", "1", under "Quantity" and the dollar amount under "Total Cost". The unit cost should include tax and shipping and handling when applicable.

Type of Supply	Quantity	Unit Cost	Total Cost	Paid With	
				F	C
Copy paper	2	\$40	\$80	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Postage	337	.44	\$148	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
General office supplies			\$529	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
CATEGORY TOTAL			\$757		

CATEGORY SUMMARY	
FEDERAL FUNDS	\$379
CASH MATCH	\$378
CATEGORY TOTAL	\$757

EXPLAIN: Explain the need for and use of each major supply type requested in relationship to the project.

Copy paper is needed to make copies of all paperwork relating to the JJDP applications and grants. The postage is needed to mail items to subgrantees and LCLE. General office supplies are needed to more efficiently run the office.

SECTION 800. OTHER DIRECT COSTS

Other Direct Costs may include items such as pro-rated audit, rent (include square footage, cost per sq. ft., monthly and total cost), and local phone charges, long distance phone charges, utilities, printing, copying, etc. All costs must be pro-rated for this project alone.

Type Of Other Direct Cost	Monthly Cost	Method Of Determining	Total Cost	Paid With	
				F	C
Rent	\$795	Pro-rated	\$1,430	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Gas for car	\$100	Pro-rated	\$180	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Telephone	\$150	Pro-rated	\$270	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Postage Machine	\$110	Pro-rated	\$198	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Office insurance	\$495 yr.	Pro-rated	\$75	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Car insurance	\$1800 yr.	Pro-rated	\$270	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
CATEGORY TOTAL			\$2,423		

CATEGORY SUMMARY	
FEDERAL FUNDS	\$1,211
CASH MATCH	\$1,212
CATEGORY TOTAL	\$2,423

BRIEFLY EXPLAIN:

Need for each type listed, and its relationship to project.

Portion of office rent in providing space for office to be maintained 1000 sq. ft. @ \$795 mth.

Portion of telephone expense to keep communications open with agencies.

Portion of expenses to maintain office car such as gas and car insurance which allows the director to visit with agencies to assist them and to attend meetings.

Portion of office insurance to cover office equipment against loss.

Portion of postage machine which speeds sup mailings due to large volume going through office.

All items are pro-rated at 15% of total cost.

A. GOALS
(All applicants must complete)

GOAL: The primary mission of all projects is to have a positive impact on the youth, not just to accumulate statistics on how many are served. Based on the problem identified, BRIEFLY state what the project hopes to accomplish. Do this by providing a clear statement of the effect this project will have on the problem.

To provide technical assistance to local governmental agencies and non-profit organizations which serve juveniles and apply to this office for funding from JJDP.

**B. OBJECTIVES, ACTIVITIES, AND
PERFORMANCE/INDICATORS/PERFORMANCE MEASUREMENTS**
(All applicants must complete)

OBJECTIVES: Provide at least TWO (2) measurable objectives for EACH goal. Objectives need to be measurable, observable aspects of the program. Identify who, what will change and by how much. Use absolute numbers, not percentages.

List the specific activities and/or services to be provided that will accomplish the objectives. Performance indicators/performance measures must include OJJDP's appropriate mandatory (bold) and at least TWO non-mandatory output and outcome indicators as stated in the OJJDP Logic Model. See application instructions. REMEMBER: This information will be reflected in the quarterly progress reports and must coincide with project goals and objectives.

1. Provide assistance to 2 agencies with programmatic questions, grant adjustments, expenditure reports, and other grant related items.
2. Review at least 2 JJDP grants.

Performance Indicators:

Output Indicator 1:	Formula Grants funds awarded for planning and administration (mandatory)
Output Indicator 2:	The number of subgrantees awarded during the reporting period (mandatory)
Output Indicator 3:	Number of District Planning meetings held (non-mandatory)
Output Indicator 4:	Average time from receipt of subgrantee grant application to date of award (non-mandatory)
Outcome Indicator 1:	Number & percent of programs that support the 3-year plan (mandatory)
Outcome indicator 2:	Number & percent of programs funded in the reporting period that were subjected to an outcome evaluation (non-mandatory)
Outcome Indicator 3:	The average time from receipt of application to date of award during the reporting period. (non-mandatory)

C. PRIOR RESULTS

1. Based on the objectives of the previous application, what were the measurable outcomes? (Number and separate outcomes so as to correspond with their relevant objectives. Include a summary of the program's activities and the number of youth served.)
 1. Capital District Law Enforcement has 3 active JJDP programs at this time.
 2. Capital District Law Enforcement has assisted at least 3 agencies with programmatic questions during this fiscal year.
 3. Capital District Law Enforcement has reviewed 3 JJDP applications and recommended funding to the JJDP Advisory Board and LCLE.

Outcome 1: All 3 program support the 3 year plan.

Outcome 2: All 3 programs were subject to an outcome evaluation.

Outcome 3: Average time was 6 months from receipt of application to date of award.

2. Did the project work as expected? Explain.

Yes. This office was able to provide funding to several agencies for JJDP programs. This office also assisted these agencies with their applications, grant adjustments, progress reports, etc.

3. Have the original goals and objectives been revised? YES NO
Explain what changes will be made in the continuation of this project and why?

None

D. DEMOGRAPHICS

1. Type of Organization

- | <u>Applicant Agency</u> | <u>Implementing Agency</u> |
|---|---|
| <input type="checkbox"/> Faith-based organization | <input type="checkbox"/> Faith-based organization |
| <input type="checkbox"/> Juvenile Justice | <input type="checkbox"/> Juvenile Justice |
| <input checked="" type="checkbox"/> Non-profit community-based organization | <input checked="" type="checkbox"/> Non-profit community-based organization |
| <input type="checkbox"/> Other community-based organization | <input type="checkbox"/> Other community-based organization |
| <input type="checkbox"/> Other government agency | <input type="checkbox"/> Other government agency |
| <input type="checkbox"/> Police/other law enforcement | <input type="checkbox"/> Police/other law enforcement |
| <input type="checkbox"/> School/Other education | <input type="checkbox"/> School/Other education |
| <input type="checkbox"/> Unit of Local Government | <input type="checkbox"/> Unit of Local Government |

2. Geographical Area:

- Rural Suburban Urban Tribal Statewide

List the street address(es) where service are provided:

1406 South Range Ave., Ste. 5, Denham Springs, LA 70726

Describe the geographical location (where service will be provided):

Capital District covers 11 parishes from west of the Mississippi River to the LA/MISS state line. The 11 parish include Point Coupee, West Baton Rouge, Iberville, Ascension, East Baton Rouge, West Feliciana, East Feliciana, St. Helena, Livingston, Tangipahoa, and Washington. These parishes are mostly rural with a few suburban areas such as Baton Rouge and Hammond. Agencies which apply for funding from JJDP are located in these areas.

Is the road map and separate written description attached? Yes No

E. METHODS

1. Describe specific procedures on how potential applicants are referred to the district

Notice of funding is placed in the Advocate. Subgrantees which are receiving funding refer other potential applicants. LCLE staff refer some potential applicants.

2. Describe how each funded project is monitored and evaluated on its progress.

The staff of Capital District review the progress reports submitted by subgrantees. The progress reports are reviewed to determine if the subgrantee is meeting the goals and objectives of their program. The staff of Capital District also reviews the history of the subgrantee in submitting their expenditure reports and progress reports in a timely manner.

3. Describe how the District Planning Council participates in the evaluation of projects for continued funding?

The staff reviews the progress reports to determine if the subgrantees have obtained their stated goals and objectives listed in the application. If the agency request continuation funding, the staff reports to the Board of Directors the success or failure of the subgrantees in meeting their goals and objectives.

4. How and what type of records will be maintained on the subgrantees of JJDP funding?

Folders are maintained on all subgrantees receiving grant awards for JJDP funding. These folders include a copy of the original application, grant award and special conditions, all paperwork from LCLE to the subgrantees, request for funds, grant adjustments, progress reports, and any other paperwork received from LCLE or subgrantees relating to these grants.

F. DISSEMINATION OF REPORTING

Name the recipients who will receive the project's results and the schedule of reporting (i.e. monthly, quarterly, yearly). Recipients **MUST** include the Louisiana Commission on Law Enforcement. Recipients should also include, if applicable, board of directors, applicant agency (if different from implementing agency), courts with jurisdiction, etc.

Quarterly progress reports and expenditure reports will be submitted to LCLE. Reports on the success or failure of each program will be reported to Capital District Executive Board of Directors.

G. AUDIT REQUIREMENTS

All applicants must check one.

This organization/agency expends \$500,000 or more in federal funds (during the fiscal year of the organization/agency from any and all sources including the amount of this application) **AND MUST SUBMIT THE FOLLOWING INFORMATION:**

1. Date of last audit:
2. Dates covered by last audit:
3. Date of next audit:
4. Dates to be covered by next audit:
5. Date next audit will be forwarded to LCLE:

This organization/agency expends less than \$500,000 in federal funds from all sources during the fiscal year of the organization/agency.