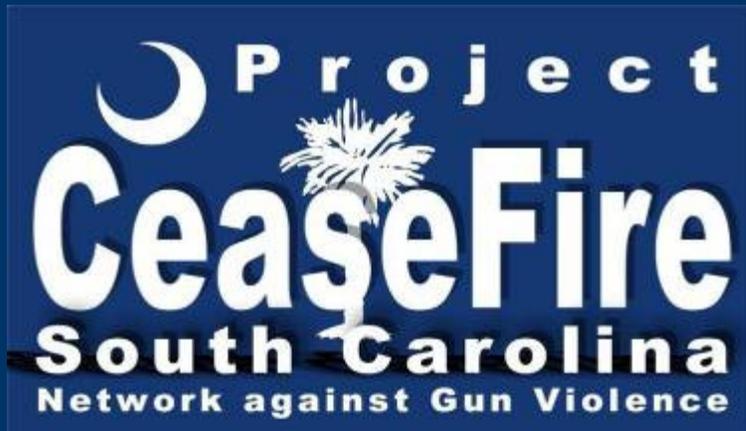


The United States Attorney's Office  
District of South Carolina



# Grants Management Workshop





**P r o j e c t**



**CeaseFire**

**South Carolina**

**Network against Gun Violence**



**P R O J E C T**

**SAFE**

**NEIGHBORHOODS**

**America's Network Against Gun Violence**



# **Stacey D. Haynes**

## **Assistant U.S. Attorney**

CeaseFire/Anti-Gang Coordinator  
United States Attorney's Office  
District of South Carolina  
1441 Main Street, Suite 500  
Columbia, SC 29201  
Office 803-929-3033  
[www.justice.gov/usao/sc](http://www.justice.gov/usao/sc)

# Project Safe Neighborhoods

- President George W. Bush and then Attorney General John Ashcroft --- May 2001
- National initiative
- Modeled after Project Exile (Virginia)
- Enforce gun laws already on the books
- Prosecution/Outreach/Education
- [www.PSN.gov](http://www.PSN.gov)

# Disturbing Statistics

- Rate of firearm deaths among children under age 15 is almost 12 times higher in the U.S. than in 25 other industrialized countries combined
- 60% of students in grades 6-12 said they could get a gun if they wanted

- 105,055 firearm violence incidents reported in S.C. from 1999 – 2009
  - Aggravated Assault and Robbery accounted for 79.6%
  - Handguns used in 72% of reported S.C. criminal firearms incidents from 1999 – 2009

- There were 126,458 victims (individual as opposed to a business or institution) related to the *reported* criminal firearms incidents in S.C. from 1999-2009

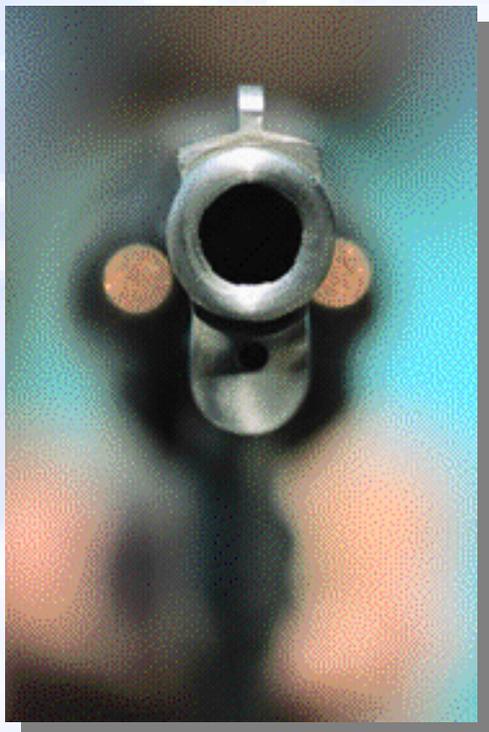
## Majority of victims

- males 18-24 yoa (30.1%)

## Majority of offenders

- males 18-24 yoa (40%)

# Key Federal Laws



- Prohibited Persons in Possession
- Lying and Buying
- Steal Guns from a Federal Firearms Dealer (FFL)
- Possess Gun with Obliterated Serial Number
- Possess Stolen Gun
- Possess Machinegun or Sawed-Off Gun
- Use or Carry a Gun in Crime of Violence or Drug Trafficking Crime
- Possess Gun After Having 3 Previous Felony Convictions for Serious Drug Offenses and/or Violent Felony

# Federally Prohibited Persons

- Convicted Felon
- Fugitive
- Drug User
- Adjudicated/Committed  
Mental Defective
- Illegal Alien
- Dishonorable Discharge
- Renounced U.S. Citizenship
- Court Order/Restraining Order
- Convicted of Domestic Violence
- 18 USC 922(g)



# **Under Federal Law, Felons (and other Prohibited Persons) Are Prohibited From Possession Of**

- **Handguns**
- **Shotguns**
- **Rifles**
- **Ammunition**

# Lying and Buying

An illegal straw purchase occurs when the actual buyer of a firearm uses another person, the “straw purchaser” to execute the paperwork necessary to purchase a firearm from a FFL.

18 USC 922(g)(6)

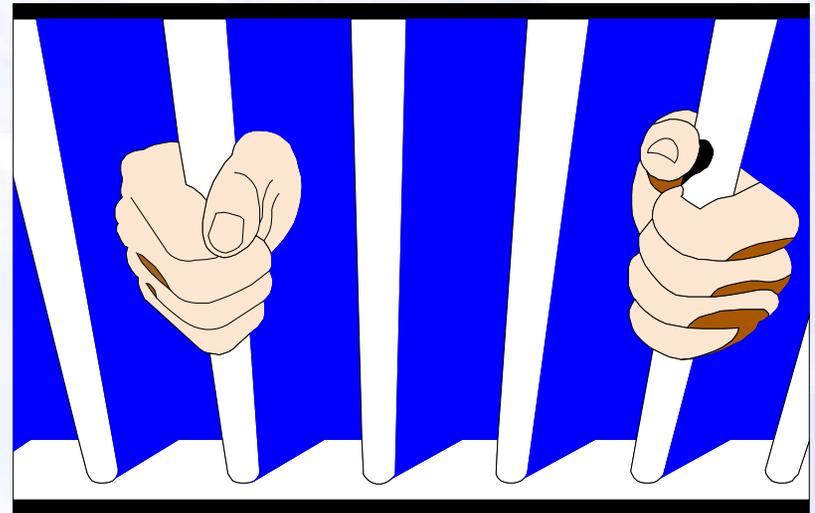


# WHY GO FEDERAL?

**GREATER SENTENCES**

**WITH**

**NO PAROLE**



# **PARTNERSHIPS**

- **South Carolina Law Enforcement Officers' Association (SCLEOA) – previously were media partner**
- **Public Service Announcements (PSAs) on television and radio**
- **Billboards**
- **Posters/Handouts/Brochures**

# SPECIAL OPERATIONS

- “Summer of Silence” – USAO, 7<sup>th</sup> Circuit Solicitor’s Office, ATF, and local law enforcement
- “Operation FED-Up” – USAO, 9<sup>th</sup> Circuit Solicitor’s Office, ATF, and local law enforcement
- We have worked with every solicitor’s office and almost every law enforcement agency in the state



# Gun Crime = HARD TIME

*Keep your neighborhood safe.  
Report weapon violations.*

[www.ProjectSafeNeighborhoods.gov](http://www.ProjectSafeNeighborhoods.gov)

**Call 1-888-CRIME-SC**



2008/08/19



# SPARTANBURG'S SUMMER OF SILENCE

**Felon + Gun = Federal Prison**

**ProjectSafeNeighborhoods.gov**

This project was supported by Grant No. 2007-DJ-CX-0064 awarded by the Bureau of Justice Assistance, a component of the Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention and the Office of Victims of Crime.



# REQUIREMENTS FOR OUTREACH MATERIALS

- Billboards, brochures, posters, etc. must be approved in advance
  - Submit to SCDPS OJP via e-mail and they will send to USAO
    - DOJ Office of Public Affairs must approve
    - Must contain PSN logo (and CeaseFire logo)
    - Must contain grant info

# PRESS RELEASES

- Press releases about program/grant should reference that the grant was awarded under “Project CeaseFire” which is South Carolina’s implementation of Project Safe Neighborhoods
- Press releases about cases arising from this program should contain language that the case was made as part of Project CeaseFire, which seeks to aggressively prosecute firearm crimes

# Resources

- National Youth Gang Center
  - Free brochure “Parent’s Guide to Gangs” – [www.iir.com/nygc](http://www.iir.com/nygc)
- National Gang Targeting, Enforcement & Coordination Center (Gang TECC)
- [www.usdoj.gov/criminal/gangtecc](http://www.usdoj.gov/criminal/gangtecc)
- Gang Resistance Education & Training (G.R.E.A.T.)
- [www.great-online.org](http://www.great-online.org)
- National Alliance of Gang Investigators’ Association website
  - [www.nagia.org](http://www.nagia.org)

# OUTREACH EFFORTS

- National Day of Concern About Young People and Gun Violence  
10/19/2011
- Approx. 130 schools participated & 63,000 pledges signed in 2010
- Project Sentry Logo contest – April
  - Savings bonds for winners
  - 655 students from 45 schools

# Prevent Guns



# In School

- Approx. 430,000 free gunlocks distributed in S.C. from 2004 – 2005 through Project ChildSafe
  - Pediatrics Journal – in U.S., 1.7 million children live in homes where there are unlocked and unloaded guns
  - Of 1,400 children and teenagers in U.S. that were shot to death in 2002, roughly 90% were at home when the incident occurred
  - [www.projectchildsafe.org](http://www.projectchildsafe.org)

# **PARTNERSHIPS**

- **S.C. Department of Public Safety (SCDPS) Statistical Analysis Center – research partner**
- **S.C. Law Enforcement Division (SLED)**
- **S.C. Budget & Control Board**
- **Crime Mapping**
- **Analysis of Firearm Incidents Across State**

# SHOTSPOTTER

- **Electronic gunfire detection system**
- **Charleston/North Charleston**
- **Sends signal to 911 dispatch**
- **Determines where gunshot occurred within 40 feet**
- **[www.shotspotter.com](http://www.shotspotter.com)**

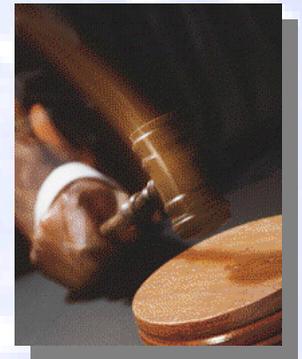
*“All that is necessary for the triumph of evil is that good men do nothing.”*

~Edmund Burke

# NETWORK



PROJECT  
**SAFE**  
NEIGHBORHOODS  
America's Network Against Gun Violence



**PROJECT**

**SAFE**

**NEIGHBORHOODS**

**America's Network Against Gun Violence**





# Statistical Analysis Center

- Part of the Office of Justice Programs.
- Primarily funded by the Bureau of Justice Statistics.
- Develop statistical reports and provide support for policy makers, criminal justice practitioners and citizens.



# Statistical Analysis Center

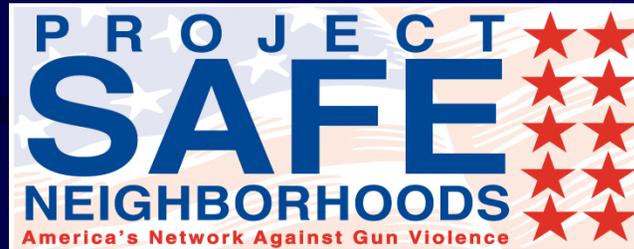
- Project CeaseFire Research Partner since 2003.
- Established collaborative relationships with: SLED, ORS, SCDC, USC, 3P, DJJ and local agencies to provide support.
- Produced reports on firearm violence, targeted offenders under supervision, gang activity and offender awareness of federal firearms laws.



# Statistical Analysis Center

- Provide technical assistance regarding availability of data, statistics, etc.
- You can review statistical reports at:  
<http://www.scdps.org/ojp/statistics.asp>
- Email at: [robertmcmannus@scdps.net](mailto:robertmcmannus@scdps.net)  
or call (803) 896-8717

# FY 2011 PSN Initiative



- **\$134,257 Awarded to South Carolina**
- **SCDPS-Office of Justice Programs is Programmatic and Fiscal Agent for the US Attorney's Office**
- **100% federal money-NO MATCH**

# **Project Safe Neighborhood FY 2011**

- **\$672,236 requested**
- **6 grants were awarded**

# The Paul Coverdell Forensic Sciences Improvement Grant Program FY 2011



## Grants Management Workshop



SC Department of Public Safety  
Office of Justice Programs

# **The Paul Coverdell Forensic Sciences Improvement Grant Program FY 2011**

- **\$456,036 Awarded to South Carolina.**
- **7 grants were awarded.**
- **100% Federally Funded (no match required).**

# **Office of Justice Programs Staff**

- **Burke Fitzpatrick, OJP Administrator**
- **Bonnie Burns, Program Manager**
- **Terri Reed, Administrative Assistant**
- **Ginger Dukes, Program Coordinator**
- **Brannon Thomas, Program Coordinator**

# Notebook Contents



**Violent Gang & Gun Crime Reduction Program  
Project Safe Neighborhoods**

*FY 2011*



South Carolina Department of Public Safety  
Office of Justice Programs



**Coverdell Forensic Science  
Improvement Grants Program**

*FY 2011*



South Carolina Department of Public Safety  
Office of Justice Programs



**Address:**

**SCDPS Main Address:**

*Post Office Box 1993*

*Blythewood, SC 29016*

**SCDPS Street Address:**

*10311 Wilson Boulevard*

*Blythewood, SC 29016*

# SC Department of Public Safety Website:



The screenshot shows the website header with the SCDPS logo and three images labeled 'Protecting', 'Educating', and 'Serving'. Below the header is a navigation menu with 'OJP Links' selected. The main content area is titled 'Welcome to the Office of Justice Programs website' and contains a 'MISSION STATEMENT', 'VALUES', and several key terms: Integrity, Excellence, Accountability, Employees, and Leadership. There are also news items and a link to the 'OJP GMIS Loqon'.

**OJP Links**

- SCDPS Home Page
- OJP Information
  - [Contact Information](#)
  - [OJP Related Links](#)
  - [Staff Directory](#)
  - [Organizational Chart](#)
- Grant Programs
  - [Criminal Justice](#)
  - [Juvenile Justice](#)
  - [Victims of Crime](#)
- Statistics
  - [Statistical Services](#)

**Welcome to the Office of Justice Programs website**

**MISSION STATEMENT:**  
The mission of the South Carolina Department of Public Safety is to protect and serve the public with the highest standard of conduct and professionalism; to save lives through educating its citizens on highway safety and diligent enforcement of laws governing traffic, motor vehicles, and commercial carriers; and to ensure a safe, secure environment for the citizens of the state of South Carolina and its visitors.

**VALUES:** In accomplishing its mission, the Department of Public Safety sets forth the following core values:

**Integrity:** Integrity is a fundamental value. It is characterized by honesty, fairness and ethical behavior.

**Excellence:** Excellence is the result of employees consistently doing their jobs professionally, with a customer focus and constantly striving for improvement.

**Accountability:** As an organization and employees we are good stewards of the authority, responsibilities and resources entrusted to us.

**Employees:** Employees are our most valuable asset, recognized for functioning as individual ambassadors of the department and collectively as a team in our commitment to protect and save lives.

**Leadership:** We expect our employees to be leaders. We further expect them to be respectful of others, responsible for their actions and take the initiative to perform at a consistently high level.

**New** - [Bureau of Justice Assistance Seeks Application for the State Criminal Alien Assistance Program](#)  
- [Guidelines](#) (PDF)

**New** - [Project Safe Neighborhoods Initiative 2011 Grant Solicitation](#) **Deadline: July 22, 2011**

**OJP Quick Links**

- [OJP Related Links](#)
- [OJP Staff Directory](#)
- [Office of Accounting Grants](#)
- 
- [OJP GMIS Loqon](#)

**GMIS  
System**

[www.scdps.org/ojp](http://www.scdps.org/ojp)

***SOUTH CAROLINA  
DEPARTMENT OF PUBLIC SAFETY  
OFFICE OF JUSTICE  
PROGRAMS***



**E-Mail**

Example---

**First and last name@scdps.net**



# ***Grant Award***

- **Grant Number**
- **Award Date**
- **Grant Period**
- **Supplantation Considerations**



GRANT NO.: 1P11

PROJECT TITLE: \_\_\_\_\_

PROJECT DIRECTOR NAME: \_\_\_\_\_

(Please Print Clearly)

AGENCY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE NO.: \_\_\_\_\_

BEEPER NO.: \_\_\_\_\_

FAX NO.: \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_



**Required**

# ***Certification of Additional Personnel (CAP)***

- **Required for all projects with personnel.**
- **Must be completed once grant-funded positions have been filled.**
- **Must be resubmitted every time any grant-funded person **or** their replacements change.**

## ***YOUR AGENCY'S LETTERHEAD***

***Your Program Coordinator's Name***

**December 15, 2011**

**Office of Justice Programs**

**S.C. Dept. of Public Safety**

**Post Office Box 1993**

**Blythewood, S.C. 29016**

Grant # - 1P11099

RE: Certification of Personnel #1

Dear \_\_\_\_\_:

### **EXAMPLE #1 – (INITIAL HIRE)**

On October 15, 2011, John “Duke” Wayne was hired for the position of Investigator. Mr. Wayne is a new hire.

### **EXAMPLE #2 –**

On October 15, 2011, John “Duke” Wayne was hired for the position of Investigator. He was formerly in patrol. Wyatt Earp who was a new hire replaced him on October 30, 2011.

### **EXAMPLE #3 –**

On October 15, 2011, John “Duke” Wayne was hired for the position of Investigator. He was formerly a Community Policing Officer. On October 25, 2011, he was replaced by Wyatt Earp who was in Patrol. New hire, Matt Dillon replaced Wyatt Earp on November 1, 2011.

### **EXAMPLE #4 – (PERSONNEL CHANGE DURING YEAR)**

On December 1st, John “Duke” Wayne resigned the position of Investigator. His position was filled by new hire, Annie Oakley, on December 15, 2011.

Sincerely,

---

(Signature of Head of Agency)

Sheriff Roy Rogers

(Typed Signature of Head of Agency)

---

(Signature of Authorized Official)

Dale Evans

(Typed Signature of Authorized Official)



# GRANTS MANAGEMENT INFORMATION SYSTEM

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OFFICE OF HIGHWAY SAFETY

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Pages

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Print This Page

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Print Application

## SPECIAL CONDITIONS

SUBGRANTEE : Solicitor's Office

GRANT TITLE : Drug and Violent Crime Prosecutors

GRANT NO. : 1G10000

AWARD DATE : 6/3/2011

ALL SPECIAL CONDITIONS MUST BE COMPLETED OR ACKNOWLEDGED IN WRITING AND APPROVED WITHIN THIRTY(30)DAYS OF THE PROJECT START DATE AND PRIOR TO ANY COMMITMENT, OBLIGATION OR DISBURSEMENT OF FUNDS UNLESS SUBGRANTEE RECEIVES PRIOR APPROVAL OF THE OFFICE OF JUSTICE PROGRAMS.

 [Check spelling](#) 

1. This award is contingent upon approval and availability of funds from the federal funding agency. Please contact Ginger Dukes, Program Coordinator, at (803) 896-8708 for further clarification.
2. All grant-funded personnel must work 100% of their time in the grant-funded position.
3. All individuals hired for grant-funded positions and those individuals hired to replace employees moved to grant-funded positions must be identified via a Certification of Additional Personnel Letter sent to this office. The Head of the Implementing Agency and the Official Authorized to Sign for the grant must sign this letter and attest that subgrant funds will not be used to supplant or replace local funds or other resources that would otherwise would have been available. Any changes to grant funded personnel must be submitted to the State Funding Agency within 30 days from the date the change occurs.

**FOR ACCOUNTING-GRANTS USE ONLY**

NO.	ASSIGNED TO	CLEARED BY	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
01	N/A	<input type="text"/>	<input type="text"/>
02	BB	<input type="text"/>	<input type="text"/>
03	BB	<input type="text"/>	<input type="text"/>
04	N/A	<input type="text"/>	<input type="text"/>
05	BB	<input type="text"/>	<input type="text"/>
06	BB	<input type="text"/>	<input type="text"/>
07	BB	<input type="text"/>	<input type="text"/>
08	PB	<input type="text"/>	<input type="text"/>
09	N/A	<input type="text"/>	<input type="text"/>
10	PB	<input type="text"/>	<input type="text"/>
11	N/A	<input type="text"/>	<input type="text"/>
12	N/A	<input type="text"/>	<input type="text"/>
13	N/A	<input type="text"/>	<input type="text"/>
14	N/A	<input type="text"/>	<input type="text"/>
15	N/A	<input type="text"/>	<input type="text"/>
16	N/A	<input type="text"/>	<input type="text"/>



Pages

1

# Special Note for PSN Grants

6. Subgrantees must coordinate with the U.S. Attorney and Project Safe Neighborhoods Task Force. Subgrantees are encouraged to coordinate with other community justice initiatives (i.e. Weed & Seed, G.R.E.A.T., etc.) and other on-going anti-gang enforcement and prevention strategies.

7. By requirement of BJA, any written, visual, or audio publications, with the exception of press releases, whether published at the agencies expense or government's expense, must include the following statement:

“This project was supported by Grant No. awarded by the Bureau of Justice Assistance is a component of the Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, and the Office of Victims of Crime. Points of view or opinions in this document are those of the author and do not represent the official position of policies of the United States Department of Justice.”

In addition, all such publications must contain the Project Safe Neighborhoods logo, unless your agency is otherwise notified by BJA. The logo can be found at <http://www.psn.gov>.

8. All public awareness/education materials developed as a part of the Program are to be submitted in draft to the State Funding Agency for written approval prior to final production and/or distribution. Equipment, supplies and other grant funded materials, as well as promotional items and presentations to include print and electronic media, shall not display the names of elected, appointed or other public officials.

9. Subgrantees will agree to enter all relevant information into the Violent Gang and Terrorist Organization File (VGTOF).



# OFFICE OF JUSTICE PROGRAMS



OJP Home

Grant Programs

Statistics

OJP Information



*Serving  
South Carolina  
Protecting  
You*

## Office of Justice Programs -

Office of the United States Attorney District of South Carolina  
Project Safe Neighborhoods Anti-Gang Grant Program



### Overview and Award Schedule

The Project Safe Neighborhoods (PSN) Anti-Gang Initiative is modeled after Project Safe Neighborhoods/Project CeaseFire, which is South Carolina's implementation of the national gun violence reduction program. Grants will pay for 100 percent of the program costs and successful applications have a twelve-month grant period. The program can fund personnel, equipment, technical assistance, travel, supplies, and research for programs which address gang involvement, crime and violence. Priority program areas include gang crime investigation, gang prevention programs, and programs to enhance data sharing and gathering. If you would like additional information regarding the PSN initiative, visit [www.projectsafeneighborhoods.gov](http://www.projectsafeneighborhoods.gov). The application due date for FY2011 funding will be in July 22, 2011 and grants will be awarded effective October 1, 2011. The United States Attorney's Office in South Carolina oversees the PSN program and has designated the SCDPS Office of Justice Programs to serve as the fiscal agent.

### Application and Forms

Additional forms and instructions are provided below.

#### Forms:

- [2011 PSN Anti-Gang Web-based Application](#) (GMIS-active 7-08)
- [Application Guidelines and Procedures](#) (MS Word)

# Transparency Act of 2006 (FFATA)

All recipients (other than individuals) of awards of \$25,000 or more under this solicitation, consistent with the Federal Funding Accountability and Transparency Act of 2006 (FFATA), will be required to report award information on any awards totaling \$25,000 or more, and, in certain cases, to report information on the names and total compensation of the five most highly compensated executives of the recipients.

# ***TRAINING REQUIREMENTS***

- **All Grant-Funded Personnel Must Receive Prior Approval For Training Approved In 2011 Award.**
- **Must use Training Request Form on GMIS.**
- **Always Attach Training Pamphlets and Agendas to Request.**



# GRANTS MANAGEMENT INFORMATION SYSTEM

OFFICE OF JUSTICE PROGRAMS

OFFICE OF HIGHWAY SAFETY

Save & Close

Cancel

## Training Approval Request

As a reminder, requests for training not involving the expenditure of grant funds (such as classes at the Criminal Justice Academy) do not need prior approval. Class attendance should be noted on Progress Reports, and any certificates received should be submitted. Also, it is the responsibility of the sub-grantee and not the State Administrative Agency to ensure that there are adequate funds in the grant to attend the training event. This approval is for programmatic purposes only.

Grant Number:

Grant Project Title:

Agency Name:

Name of Course:

### Cost of Course

#### Registration

Amount:

Notes:

\*List type of travel and cost details per person (airfare, ground transportation, parking, mileage).

#### Travel

Amount:

Notes:

#### Meals or Per Diem

Amount:

Notes:

#### Lodging

# ***Monitoring Visits***

- **At least one per year.**
- **Have grant funded personnel available.**
- **Have grant funded equipment available.**
- **Have grant file available.**
- **Provide technical assistance and answer any questions.**



# ***Progress Reports***



South Carolina Department of Public Safety -- Office of Justice Programs  
**PROJECT SAFE NEIGHBORHOOD**  
Progress Report

1. Project Grant #: IP11 \_\_\_\_\_ Date this report was completed: \_\_\_\_\_  
Project Title: \_\_\_\_\_

2. Current Report Period (Check One)

- First Report (October 1, 2011 – March 31, 2012)*  
**Report due May 1, 2012**
- Final Report (April 1, 2012 – September 30, 2012)*  
**Report due November 15, 2012**

3. Subgrantee/Recipient Contact Information

Contact Person: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

4. **CERTIFICATION:** I understand that any deviation from the programmatic or financial plans in the approved grant must first receive prior written approval from the Department of Public Safety, Office of Justice Programs before implementation. As an authorized individual agreeing to comply with the general and fiscal terms and conditions including special conditions of this grant, I certify the information contained in this report is accurate and, to the best of my knowledge, program expenditures and activities are in compliance with the approved grant and federal/state regulations.

\_\_\_\_\_  
Project Director  
(Signature of Project Director as listed in the grant award)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed Name and Title

\_\_\_\_\_  
Telephone Number

Submit this report (**ONE ORIGINAL AND ONE COPY**) to:

*Ms. Ginger Dukes, Program Coordinator*  
*Office of Justice Programs*  
*S.C. Department of Public Safety*  
*P O Box 1993*  
*Blythewood, S.C. 29016*

**South Carolina Department of Public Safety -- Office of Justice Programs  
Forensic Science Improvement Grant Program  
Progress Report for Federal Fiscal Year 2011**

This report is ***CUMULATIVE*** and should include all activities for the ***ENTIRE GRANT PERIOD***.

Project Grant #: INF11\_\_\_\_\_ Date this report was completed: \_\_\_\_\_ Funding Year: 1 2 3

Project Title: \_\_\_\_\_

Current Report Period (Check One)

*First Report (October 1, 2011 – March 31, 2012)  
Report due May 1, 2012*

*Final Report (October 1, 2011 – September 30, 2012)  
Report due November 15, 2012*

Subgrantee/Recipient Contact Information

Contact Person: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**CERTIFICATION:** I understand that any deviation from the programmatic or financial plans in the approved grant must first receive prior written approval from the Department of Public Safety, Office of Justice Programs before implementation. As an authorized individual agreeing to comply with the general and fiscal terms and conditions including special conditions of this grant, I certify the information contained in this report is accurate and, to the best of my knowledge, program expenditures and activities are in compliance with the approved grant and federal/state regulations.

\_\_\_\_\_  
Project Director  
(Signature of Project Director as listed in the grant award)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed Name and Title

\_\_\_\_\_  
Telephone Number

**Submit this report (ONE ORIGINAL AND ONE COPY) to:**

**Bonnie Burns- Program Manager  
Office of Justice Programs  
S.C. Department of Public Safety  
P O Box 1993  
Blythewood, S.C. 29016**

# ***Progress Reports***

## ***-- Special Notes --***

- **Upload Progress Report to GMIS.**
- **Place signed copy in notebook with Project Director signature.**
- **Reports on our website & in notebook.**
- **Period covered & due dates on each report.**
- **List & discuss each objective in both first and final report.**

# ***Progress Report due dates...***

- ***First Report (October 1, 2011- March 31, 2012)***

***Report due May 1, 2012***

- ***Final Report (October 1, 2011- September 30, 2012)***

***Report due November 15, 2012***





**PLEASE TAKE A  
10 MINUTE  
BREAK!**



***South Carolina  
Department of Public Safety***

**Office of Financial  
Services**



# Grants Accounting Staff

**Stephen Fulmer - Office of Financial Services**

[stephenfulmer@scdps.net](mailto:stephenfulmer@scdps.net)

803.896.5457

**Peggy McBride - Senior Accountant**

[peggymcbride@scdps.net](mailto:peggymcbride@scdps.net)

803.896.8414

**Courtney Dickey - Accounting Technician**

[courtneydickey@scdps.net](mailto:courtneydickey@scdps.net)

803.896.4807

# **Presentation Outline**

**I- Review of Key Financial Terms and Conditions**

**II- Procurement and Travel**

**III- Requests for Payment**

**IV- Budget Revisions**

**V- Property Control**

**VI- Review and Conclusion**

# Review of Key Terms and Conditions

## 4. Audit Requirements

- a. If you expend 500,000 or more in total federal assistance during your fiscal year, you are required to have an A-133 Audit. Exception for State Agencies.
- b. Refer to page 6 of your application. Your audit must be submitted to us within 9 months of your fiscal year end, and must include any management letters issued to you by your auditors.

# Review of Key Terms and Conditions

## 8. Non-Supplanting Agreement

The subgrantee shall not use grantor funds to supplant state or local funds or other resources that would otherwise have been made available for this program. Further, if a position created by a grant is filled from within, the vacancy created by this action must be filled.

- **Grant positions must be a new position; a net addition in personnel for your agency.**

# **Review of Key Terms and Conditions**

## **11. Contract Approval Requirements**

- a. If Contractual Services are a part of your grant, contact us for advice if you have questions.**
- b. We have a standard contract available for your use. Use this contract.**
- c. All contracts must be reviewed and approved prior to execution.**

# **Review of Key Terms and Conditions**

## **18. Obligation of Grant Funds**

- a. Do not obligate funds prior to the effective date of the award.**
- b. We cannot reimburse you for expenses incurred outside of these time limits.**
- c. The final RFP must be received within 45 days of the grant ending date:**

**Final RFP due November 15, 2012**

# Review of Key Terms and Conditions

## 19. Utilization and Payment

- a. We will reimburse only for items in your approved grant budget.
- b. Submit RFP's no more frequently than monthly, no less frequently than quarterly.
- c. We may adjust your reimbursement amount to adjust for unallowable expenses, audit adjustments, or to correct errors. We will notify you of any adjustments.

# Review of Key Terms and Conditions

## 20 & 21 Highlights:

- a. Your accounting system must record grant expenses and revenues separately from other agency expenses and revenues.
- b. Accounting records must be supported by reliable and authoritative source documents.

**Practice good accounting and use good business practices.**

# Review of Key Terms and Conditions

## 23. Program Income

- a. Examples include donations or confiscated cash that has been awarded to your agency by the courts.
- b. Program income may be used to supplement project costs, and must be used for allowable program costs.
- c. The use of all program income must have prior written approval.
- d. Program income must be properly accounted for, separately from other grant revenues.

# Review of Key Terms and Conditions

## 24. Retention of Records

- a. Property Records- 3 years after final disposition of the property.
- b. All other files- 3 years after the submission of your final expenditure report (RFP).

# Procurement and Travel Procurement

Exception to bidding rules: Items that are on state contract.

Visit the MMO website for information at:

[www.mmo.sc.gov/MMO/MMO-index.phtm](http://www.mmo.sc.gov/MMO/MMO-index.phtm)

# Procurement and Travel

## Procurement

**0 to 2,500.00:**

- a. Formal, written bids are not required.
- b. Do not submit bids; maintain documentation in your file.

# Procurement and Travel

## Procurement

**2,500.01 to 10,000:**

- a. Obtain bids from a minimum of three sources.
- b. Formal, written bids are required.
- c. Bids must be submitted for prior approval.

# Procurement and Travel

## Procurement

### 10,000.01 to 50,000:

- a. Written solicitation & written bids are required.
- b. Advertisement must be in SCBO or newspaper of statewide circulation.
- c. Bids must be submitted to us for prior approval.
- d. Contact us for advice on the process if you have questions or are unsure.

# Procurement and Travel

## Procurement

### **Over 50,000:**

- a. Competitive, sealed bidding procedures required.
- b. Contact us first.**

# Procurement and Travel

## Travel

Basic Rule: Travel costs must be consistent with your agencies policies and procedures. In the absence of policies, **or if state policy is more restrictive, follow state policy.**

# Procurement and Travel

## Travel

**Per Diem: Follow your policy, up to State limits.**

	<b>In State</b>	<b>Out of State</b>
Breakfast	<b>\$6</b>	<b>\$7</b>
Lunch	<b>\$7</b>	<b>\$9</b>
Dinner	<b>\$12</b>	<b>\$16</b>
<b>Per Day Limit</b>	<b>\$25</b>	<b>\$32</b>

Submit your internal form documenting the number of days and amount claimed. Contact us if you do not have a form.

# Procurement and Travel

## Travel

### Mileage

- a. Follow your policy, up to **State** limits.
- b. The state follows federal policy; however, rate changes must be approved by the Comptroller General's Office.
- c. Complete travel support document for reimbursement.

**Current Approved Rate:**

**\$0.505 per mile.**

# Procurement and Travel

## Travel

### Lodging

- a. Follow your policy, up to State limits.
- b. The state now follows GSA rates.**
- c. Verify lodging rates on the GSA website at <http://www.gsa.gov> at the time of grant budget preparation.
- d. Note rates vary by location. If your location is not listed, **the default rate is \$77 per person, per night.**

# **Procurement and Travel**

## **Travel**

### **Lodging**

**e.** Note the following clarification on travel related to training or conferences:

- I.** If the training or conference is held at a hotel, we will generally grant an exemption to the GSA rates to allow you to stay at the hotel.
- II.** Submit conference/training brochure evidencing the location of the conference and the lodging rate.
- III.** Note this is not a guarantee, lodging is still subject to review and approval.

# Requests for Payment

- Note the first page of the RFP is a summary.
- Complete pages 2, 3 & 4 first, then transfer those figures to the first page.
- **Final RFP's are due to us by:**

**November 15, 2012.**

# Requests for Payment

## Page 2: Personal Services

Rev. 2/00	SUMMARY STATEMENT OF PERSONAL SERVICES								Page 2	
CRIMINAL JUSTICE PROGRAMS										
SUBGRANTEE NAME:						GRANT NO.		RFP NO.		
PERIOD COVERED: FROM:		TO:		PAYMENT FREQUENCY: WEEKLY			BIWEEKLY	MONTHLY		
A	B	C	D	E	F	G	H	I	J	
Name of Employee	Job Title	Hours Worked on Project	Total Hours Worked	%	Base Salary for Period Covered	Fringe Benefits	Total Salary & Fringe	Total Charged to Project Grantor Salary	Cash Match Salary	
Full Name	Actual Title	Project Hrs	Total Hrs	Project/Total	Salary Only	Fringes Only	Sal+Fringe	Total Sal & Fringe * %	Cash Match Only	
Jim Smith	Officer	160.00	160.00	100%	\$1,500.00	\$0.00	\$1,500.00	\$1,500.00	\$0.00	
TOTALS:					\$1,500.00	\$0.00	\$1,500.00	\$1,500.00	\$0.00	
								1	2	

- Note column E is column C divided by column D.
- Note Column F and G is the total Salary and Fringe for this period.
- Note Column I and J is the total Salary and Fringe Charged to the grant for reimbursement.

# Requests for Payment

## Page 1: Summary

Revised 2/00	STATE OF SOUTH CAROLINA			Page 1		
DEPARTMENT OF PUBLIC SAFETY						
<b>2. BUDGET CATEGORIES:</b>			<b>USE WHOLE DOLLARS ONLY!</b>			
	<b>EXPENDITURES THIS PERIOD</b>			<b>TOTAL EXPENDITURES TO DATE</b>		
	<b>Grantor</b>	<b>Agency</b>		<b>Grantor</b>	<b>Agency</b>	
	<b>Amount</b>	<b>Match</b>	<b>Total</b>	<b>Amount</b>	<b>Match</b>	<b>Total</b>
Personnel*	\$1,500	\$0	\$1,500			
	1	2				
Contractual Services						
Travel						
Equipment*						
Renov./Const.						
Other*						
*Please itemize budget details for						
Personnel, Equipment and						
Other on Page 2						

# Requests for Payment

## Page 3: Equipment

CATEGORIES		GRANTOR	MATCHING FUNDS		TOTAL
			CASH	IN-KIND	
<b>USE WHOLE DOLLARS ONLY</b>					
<b>IV. EQUIPMENT \$1,000 (Itemize - DO NOT use brand name)</b>					
ITEM(S) MUST BE IN APPROVED GRANT BUDGET					
ITEM	QUANTITY				
Dell Laptop- 1 @ \$1,500	1	1,500	0	0	1,500
<b>TOTAL EQUIPMENT:</b>		<b>1,500</b>	<b>0</b>	<b>0</b>	<b>1,500</b>
<b>V. RENOVATIONS/CONSTRUCTION: (Describe)</b>					
		<b>3</b>	<b>4</b>		
<b>TOTAL RENOVATIONS/CONSTRUCTIONS:</b>					
<b>VI. OTHER: (Itemize)</b>					
ITEM(S) MUST BE IN APPROVED GRANT BUDGET					
Cameras- 2 @ \$50	2	100	0	0	100
<b>TOTAL OTHER:</b>		<b>100</b>	<b>0</b>	<b>0</b>	<b>100</b>

-Note the categories on this form should mirror your grant budget.

-Note only items purchased during this period should be included on this form.

# Requests for Payment

## Page 1: Summary

2. BUDGET CATEGORIES:			USE WHOLE DOLLARS ONLY!			
	EXPENDITURES THIS PERIOD			TOTAL EXPENDITURES TO DATE		
	Grantor Amount	Agency Match	Total	Grantor Amount	Agency Match	Total
Personnel*						
Contractual Services						
Travel						
Equipment*	1,500	\$0	\$1,500			
	3	4				
Renov./Const.						
Other*	100	\$0	\$100			
*Please itemize budget details for Personnel, Equipment and Other on Page 2	1	2				

# Requests for Payment

## Page 4: Travel

TRAVEL SUPPORT DOCUMENT							Rev. 2/00
Name:				Month:	Year:	Grant No.:	
Date	Origin	Destination	Purpose of Trip	Beginning Odometer	Ending Odometer	Total Daily Mileage	
09/20/09	Sherriff's Department	Myrtle Beach, SC	Conference	10000	10150	150	
Total Miles	150	X	Rate per Mile	.445	TOTAL AMOUNT:	66.75	1
I hereby certify or affirm that the above expenses were actually incurred by me as necessary traveling expenses in the performance of my official duties; any meals or lodging included in a conference or convention registration fee have been deducted from this travel claim, conforms with the requirements of local and grant laws, rules and regulations.				Certification: I certify that this is a correct statement of allowable travel cost for the period identified above and conforms with applicable local and grant regulations.			
Employee	Date	Supervisor	Date				

**Your rate, up to the federal max.**

- Note Odometer readings are required.
- Note Origin, Destination, and Purpose of trip must be specific enough to evidence travel is allowable.
- If there is more than one page, total each page.

# Requests for Payment

## Page 1: Summary

Revised 2/00	STATE OF SOUTH CAROLINA			Page 1		
DEPARTMENT OF PUBLIC SAFETY						
<b>2. BUDGET CATEGORIES:</b>				<b>USE WHOLE DOLLARS ONLY!</b>		
	<b>EXPENDITURES THIS PERIOD</b>			<b>TOTAL EXPENDITURES TO DATE</b>		
	<b>Grantor</b>	<b>Agency</b>		<b>Grantor</b>	<b>Agency</b>	
	<b>Amount</b>	<b>Match</b>	<b>Total</b>	<b>Amount</b>	<b>Match</b>	<b>Total</b>
Personnel*						
Contractual Services						
Travel	67	\$0	67			
Equipment*	1					
Renov./Const.						
Other*						
*Please itemize budget details for						
Personnel, Equipment and						
Other on Page 2						

# Requests for Payment

## Page 1: Summary- General Information

Revised 2/00		STATE OF SOUTH CAROLINA			Page 1		
		DEPARTMENT OF PUBLIC SAFETY					
REQUEST FOR PAYMENT/QUARTERLY FISCAL REPORT							
<b>1. GENERAL INFORMATION</b>				Request for Payment Number:			
Subgrantee Name:				County No.:			
Project Title:				Period Ending Date:			
				Grant Period:			
				Grant Type:			
				A= Advance			
				R=Reimbursable			
Grant Number		Payment Type*					
		*I=Interim Payment, *B=Final Payment, Automatic Deobligation					
<b>2. BUDGET CATEGORIES:</b>				<b>USE WHOLE DOLLARS ONLY!</b>			
				<b>EXPENDITURES THIS PERIOD</b>			<b>TOTAL EXPENDITURES TO DATE</b>
				<b>Grantor</b>	<b>Agency</b>		<b>Grantor</b>
				<b>Amount</b>	<b>Match</b>	<b>Total</b>	<b>Amount</b>
							<b>Match</b>
							<b>Total</b>
Personnel*							
Contractual Services							
Travel							
Equipment*							
Renov./Const.							
Other*							
*Please itemize budget details for Personnel, Equipment and Other on Page 2							
<b>3. TOTAL COSTS:</b>							
<b>4. REQ. FOR ADVANCE</b>							
<b>5. PROJECT INCOME:</b>							
<b>6. UNPAID OBLIGATIONS:</b>							
<b>7. CERTIFICATION</b>							
I certify that this is a correct statement of project costs for the period identified above and that appropriate documentation to support these costs is attached. Additionally, all expenses claimed are made in compliance with federal, state, and local statutes and regulations and are in accordance with the approved grant.							
Project Director Signature						Date	
<b>DPSP USE ONLY:</b>							
Account Number				Object Code	Approved Amt.	Vendor Number	
Fiscal Officer Signature						Date	

**Grant Information**



**Total to date**



**Totals**



**Program Income**



**Project Director Signature**



# **Budget Revisions & Property**

## **Notes on Budget Revisions**

- Budget revisions must be submitted via the GMIS system.

# Budget Revisions and Property

## Budget Revision- GMIS Form



OFFICE OF JUSTICE PROGRAMS

Justice Assistance Grant (JAG) 2007

Close < Pages > Cancel

Print This Page Revision Form Print Application

1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14.  
15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26

**REQUEST FOR GRANT EXTENSION AND/OR REVISION**

Grant Number: \_\_\_\_\_ Date: \_\_\_\_\_ Revision #: 1

SUBGRANTEE: \_\_\_\_\_  
GRANT TITLE \_\_\_\_\_

Type of Request:  
 Programmatic Revision  
 Budget Revision:

**1. REQUEST FOR EXTENSION**

Last Approved Grant Period: \_\_\_\_\_ Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_  
Proposed Grant Period: \_\_\_\_\_ Begin Date: \_\_\_\_\_ End Date: \_\_\_\_\_

**Section 1a.**

Check spelling

JUSTIFICATION FOR PROPOSED EXTENSION: \_\_\_\_\_

**2. REQUEST FOR BUDGET AND/OR PROGRAMMATIC REVISION**

| Specific Area(s) to be revised | Current Approved Federal Amount | Requested Amount | Difference |     |
|--------------------------------|---------------------------------|------------------|------------|-----|
|                                |                                 |                  | (+)        | (-) |
| Personnel                      | \$0                             | \$0              | \$0        |     |
| Contractual Services           | \$0                             | \$0              | \$0        |     |
| Travel                         | \$0                             | \$0              | \$0        |     |
| Equipment                      | \$0                             | \$0              | \$0        |     |
| Other                          | \$0                             | \$0              | \$0        |     |
| Total                          | \$0                             | \$0              | \$0        |     |

Check type of revision

Enter dates

Complete explanation of why the extension is necessary

Enter current and revised numbers

Total Difference should be zero

Use this section for an extension

Use this section for a budget or programmatic revision

# Budget Revisions and Property

## Budget Revision- GMIS Form

ABC [Check spelling](#) ▾

JUSTIFICATION FOR THE REQUESTED REVISION:

ABC [Check spelling](#) ▾

PAGE NUMBER(S) OF REVISED GRANT PAGES:

---

**3. SUBGRANTEE GRANT OFFICIAL:**

Print Name:

Signature:  (Signature not required for Electronic Submissions)

---

**FOR STATE FUNDING AGENCY ONLY:**

Senior Accountant  ▾

Date

Initial

Program Coordinator  ▾

Date

Initial

Availability of Funds:  ▾

Date

Initial

Comments:

Pages

**Revision Form**

1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26

Complete explanation of why the revision is necessary

Enter page numbers the revision is made to

Any of the three authorized officials on the grant

Save the revision



# Budget Revisions and Property

## Notes on Property

1. Complete an entry on the property control form for each piece of equipment purchased. Send this form in with your final request for payment.
2. Equipment means an article of nonexpendable, tangible personal property having a useful life of more than one year and an acquisition cost which equals or exceeds \$1,000, including shipping cost, but not taxes.
3. All equipment must be used exclusively for the purposes stated in the grant, and must be available for review by DPS personnel during scheduled monitoring visits.

# Grants Accounting Staff

**Stephen Fulmer - Office of Financial Services**

[stephenfulmer@scdps.net](mailto:stephenfulmer@scdps.net)

803.896.5457

**Peggy McBride - Senior Accountant**

[peggymcbride@scdps.net](mailto:peggymcbride@scdps.net)

803.896.8414

**Courtney Dickey - Accounting Technician**

[courtneydickey@scdps.net](mailto:courtneydickey@scdps.net)

803.896.4807



# Grant Management Information System (GMIS)

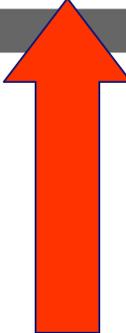
Office of Justice Programs





# Access at [www.scdps.org/ojp](http://www.scdps.org/ojp)



| OJP Links                                                                                                                                                                                                                                                                                                                                                                                                     | Welcome to the Office of Justice Programs website                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | OJP Quick Links                                                                                                                                                                                                                                                                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <a href="#">SCDPS Home Page</a><br>OJP Information<br>- <a href="#">Contact Information</a><br>- <a href="#">OJP Related Links</a><br>- <a href="#">Staff Directory</a><br>- <a href="#">Organizational Chart</a><br>Grant Programs<br>- <a href="#">Criminal Justice</a><br>- <a href="#">Juvenile Justice</a><br>- <a href="#">Victims of Crime</a><br>Statistics<br>- <a href="#">Statistical Services</a> | <p><b>MISSION STATEMENT:</b><br/>           The mission of the South Carolina Department of Public Safety is to protect and serve the public with the highest standard of conduct and professionalism; to save lives through educating its citizens on highway safety and diligent enforcement of laws governing traffic, motor vehicles, and commercial carriers; and to ensure a safe, secure environment for the citizens of the state of South Carolina and its visitors.</p> <p><b>VALUES:</b> In accomplishing its mission, the Department of Public Safety sets forth the following core values:</p> <p><b>Integrity:</b> Integrity is a fundamental value. It is characterized by honesty, fairness and ethical behavior.</p> <p><b>Excellence:</b> Excellence is the result of employees consistently doing their jobs professionally, with a customer focus and constantly striving for improvement.</p> <p><b>Accountability:</b> As an organization and employees we are good stewards of the authority, responsibilities and resources entrusted to us.</p> <p><b>Employees:</b> Employees are our most valuable asset, recognized for functioning as individual ambassadors of the department and collectively as a team in our commitment to protect and save lives.</p> <p><b>Leadership:</b> We expect our employees to be leaders. We further expect them to be respectful of others, responsible for their actions and take the initiative to perform at a consistently high level.</p> <p><b>New</b> - <a href="#">Bureau of Justice Assistance Seeks Application for the State Criminal Alien Assistance Program</a><br/>           - <a href="#">Guidelines</a> (PDF)</p> <p><b>New</b> - <a href="#">Project Safe Neighborhoods Initiative 2011 Grant Solicitation</a> <b>Deadline: July 22, 2011</b></p> | <p><a href="#">OJP Related Links</a><br/> <a href="#">OJP Staff Directory</a><br/> <a href="#">Office of Accounting Grants</a></p> <br><a href="#">OJP GMIS Logon</a>  |



# User e-mail and password



## GRANTS MANAGEMENT INFORMATION SYSTEM

OFFICE OF JUSTICE PROGRAMS

OFFICE OF HIGHWAY SAFETY

Login Name:

Password:

Forgot Password

Submit

New Account

[Click here for Application Instructions for Web-Based Grant Management Information System](#)

Comments or Questions

([Office of Justice Programs](#); [Office of Highway Safety](#))



# Forgot password



## GRANTS MANAGEMENT INFORMATION SYSTEM

OFFICE OF JUSTICE PROGRAMS

OFFICE OF HIGHWAY SAFETY

Login Name:

Password:

Forgot Password

Submit

New Account

[Click here for Application Instructions for Web-Based Grant Management Information System](#)

Comments or Questions

([Office of Justice Programs](#); [Office of Highway Safety](#))



# GMIS User account change

- One user account per agency
- User leaves agency
- User is reassigned or transferred to other duties
- User is assigned new e-mail address



The screenshot shows the login interface for the Grants Management Information System (GMIS). At the top left is the Department of Homeland Security seal. To its right is a blue banner with the text "GRANTS MANAGEMENT INFORMATION SYSTEM" and "OFFICE OF HIGHWAY SAFETY" and "OFFICE OF JUSTICE PROGRAMS". Below the banner is a light blue login box containing the following elements:

- Login Name:
- Password:
- Forgot Password
- Submit
- New Account

Click [here](#) for Application Instructions for Web-Based Grant Management Information System

Comments or Questions  
([Office of Justice Programs](#); [Office of Highway Safety](#))



# Grant Revisions

- ❖ Add a line item
- ❖ Move money to underfunded area (10%)
- ❖ Increase quantity of item
- ❖ Use up extra money
- ❖ Special conditions
- ❖ Extension of grant period
- ❖ Change grant focus (rare)
- ❖ Change signature pages (State changes in Justification Section)

**When in doubt...Call first**

# Grant Revisions



## GRANTS MANAGEMENT INFORMATION SYSTEM

OFFICE OF JUSTICE PROGRAMS

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[Help](#)  
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[Logout](#)

| <a href="#">Grant#</a> | <a href="#">Application #</a> | <a href="#">Status</a> | <a href="#">Department</a>          | <a href="#">Grantor</a> | <a href="#">Match</a> | <a href="#">Total</a> | <a href="#">Submitted Date</a> | <a href="#">Submitted Time</a> |  |
|------------------------|-------------------------------|------------------------|-------------------------------------|-------------------------|-----------------------|-----------------------|--------------------------------|--------------------------------|--|
| 1G11000                | AG11122-1                     | Edit - Not Submitted   | Justice Assistance Grant (JAG) 2011 | \$91,890.00             | \$10,210.00           | \$102,100.00          | N/A                            | N/A                            |  |
|                        | T11490                        | Edit - Not Submitted   | RSAT 2011                           | \$0.00                  | \$0.00                | \$0.00                | N/A                            | N/A                            |  |
|                        | T11179                        | Edit - Not Submitted   | Justice Assistance Grant (JAG) 2011 | \$0.00                  | \$0.00                | \$0.00                | N/A                            | N/A                            |  |
|                        | T10863                        | Edit - Not Submitted   | Project Safe Neighborhoods 2010     | N/A                     | N/A                   | N/A                   | N/A                            | N/A                            |  |
|                        | T10862                        | Edit - Not Submitted   | Project Safe Neighborhoods 2010     | \$0.00                  | \$0.00                | \$0.00                | N/A                            | N/A                            |  |
|                        | T10791                        | Edit - Not Submitted   | Forensic Science 2010               | N/A                     | N/A                   | N/A                   | N/A                            | N/A                            |  |



**Click on folder to open grant**



# Grant Revisions



**GRANTS  
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INFORMATION  
SYSTEM**

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- [Logout](#)

## Justice Assistance Grant (JAG) 2011

|                     |                                                           |
|---------------------|-----------------------------------------------------------|
| Grant Number:       | 1G11000                                                   |
| Application Number: | AG11122                                                   |
| Version:            | Revision 1 <input type="button" value="Create Revision"/> |
| County:             | RICHLAND                                                  |
| Begin Date:         | 7/1/2011                                                  |
| Ending Date:        | 6/30/2012                                                 |
| Project Title:      | Sample Grant                                              |
| Submitted Date:     | 6/23/2011 3:16:00 PM                                      |
| Award Date:         | 6/3/2011                                                  |
| Awarded Amount:     | \$91,890                                                  |
| Required Match:     | \$10,210                                                  |
| Attachments:        | 0                                                         |



- 
- 
- 
-



# Grant Revisions



**GRANTS  
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INFORMATION  
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## Justice Assistance Grant (JAG) 2011

|                     |                                                           |
|---------------------|-----------------------------------------------------------|
| Grant Number:       | 1G11000                                                   |
| Application Number: | AG11122                                                   |
| Version:            | Revision 1 <input type="button" value="Create Revision"/> |
| County:             | RICHLAND                                                  |
| Begin Date:         | 7/1/2011                                                  |
| Ending Date:        | 6/30/2012                                                 |
| Project Title:      | Sample Grant                                              |
| Submitted Date:     | 6/23/2011 3:16:00 PM                                      |

**Message from webpage** ✕

 This will create a revision to your current grant. If you need to create a new grant application for the next funding year, select "New Application" in the top right corner of the screen and choose your appropriate grant application. Do you wish to continue?

# Grant Revisions



**GRANTS  
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INFORMATION  
SYSTEM**

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[Logout](#)

## Justice Assistance Grant (JAG) 2011

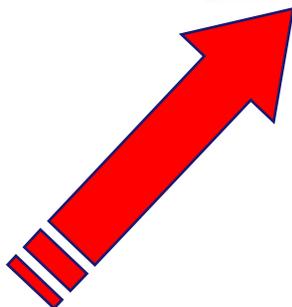
|                     |                                                                                       |
|---------------------|---------------------------------------------------------------------------------------|
| Grant Number:       | 1G11000                                                                               |
| Application Number: | AG11122                                                                               |
| Version:            | Revision 1 <input type="button" value="Create Revision"/>                             |
| County:             | RICHLAND                                                                              |
| Begin Date:         | 7/1/2011                                                                              |
| Ending Date:        | 6/30/2012                                                                             |
| Project Title:      | Sample Grant                                                                          |
| Submitted Date:     |                                                                                       |
| Attachments:        | 0  |

[Edit Application](#)

[Submit Application](#)

[Training Requests - 1](#)

[Progress Reports](#)





# Grant Revisions



## Justice Assistance Grant (JAG) 2011

|                                                                                               |   |                                  |                                |                   |
|-----------------------------------------------------------------------------------------------|---|----------------------------------|--------------------------------|-------------------|
| Save & Close                                                                                  | < | Pages                            | >                              | Cancel            |
| Print This Page                                                                               |   | <b>Revision Form</b>             |                                | Print Application |
| 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26 |   |                                  |                                |                   |
| <b>REQUEST FOR GRANT EXTENSION AND/OR REVISION</b>                                            |   |                                  |                                |                   |
| Date: <input type="text" value="7-13-2011"/>                                                  |   |                                  |                                |                   |
| SUBGRANTEE : <input type="text" value="Grant County"/>                                        |   |                                  |                                |                   |
| GRANT TITLE : <input type="text" value="Sample Grant"/>                                       |   |                                  |                                |                   |
| Type of Request:                                                                              |   |                                  |                                |                   |
| <input type="checkbox"/> Programmatic Revision                                                |   |                                  |                                |                   |
| <input checked="" type="checkbox"/> Budget Revision:                                          |   |                                  |                                |                   |
| <input type="checkbox"/> <b>1. REQUEST FOR EXTENSION</b>                                      |   |                                  |                                |                   |
| Last Approved Grant Period:                                                                   |   | Begin Date: <input type="text"/> | End Date: <input type="text"/> |                   |
| Proposed Grant Period:                                                                        |   | Begin Date: <input type="text"/> | End Date: <input type="text"/> |                   |



# Grant Revisions

## 2. REQUEST FOR BUDGET AND/OR PROGRAMMATIC REVISION

| Specific Area(s) to be revised | Current Approved Federal Amount | Requested Amount | Difference |         |
|--------------------------------|---------------------------------|------------------|------------|---------|
|                                |                                 |                  | (+)        | (-)     |
| Personnel                      | \$100,000                       | \$99,600         |            | (\$400) |
| Contractual Services           | \$0                             | \$0              | \$0        |         |
| Travel                         | \$0                             | \$0              | \$0        |         |
| Equipment                      | \$2,000                         | \$2,000          | \$0        |         |
| Other                          | \$100                           | \$500            | \$400      |         |
| Total                          | \$102,100                       | \$102,100        | \$0        |         |

[Check spelling](#) ▼

JUSTIFICATION FOR THE REQUESTED REVISION: Additional funds are available in personnel due to not hiring the investigator until September 12, 2011. We are requesting that we add to the "Other" category a digital camera with accessories and three 4GB flash drives to assist the investigator in documentation of evidence.

PAGE NUMBER(S) OF REVISED GRANT PAGES:   [Check spelling](#) ▼

## 3. SUBGRANTEE GRANT OFFICIAL:

Print Name:

Signature:  (Signature not required for Electronic Submissions)

## FOR STATE FUNDING AGENCY ONLY:

Senior Accountant  ▼



# Grant Revisions



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## Justice Assistance Grant (JAG) 2011

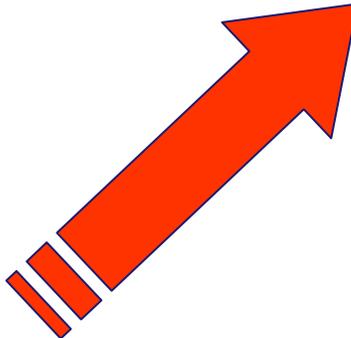
|                     |                                                                                       |
|---------------------|---------------------------------------------------------------------------------------|
| Grant Number:       | 1G11000                                                                               |
| Application Number: | AG11122                                                                               |
| Version:            | Revision 1 <input type="button" value="Create Revision"/>                             |
| County:             | RICHLAND                                                                              |
| Begin Date:         | 7/1/2011                                                                              |
| Ending Date:        | 6/30/2012                                                                             |
| Project Title:      | Sample Grant                                                                          |
| Submitted Date:     |                                                                                       |
| Attachments:        | 0  |

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# Grant Revisions



## Grant Application Review Check List

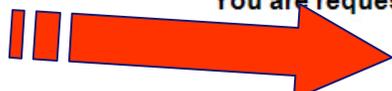
In order to avoid common mistakes, applicants should answer the following questions when reviewing their completed application:

- Do the budget figures on pages 1-5 add up correctly?
- Are all sections of the application completed?
- Have you included the evaluation component?
- Are the objectives quantifiable?
- Is there a corresponding performance indicator for each objective?
- Do the data in the Needs Assessment/Problem Statement include the most current available? Are they specific to the target area?
- Do the last two pages include the names and addresses of the three required officials?
- If you are applying for a continuation, have you included detailed information about program progress and accomplishments to date?

---

**Once you press SUBMIT, this application will not be available for changes.**

**You are requesting that this application be submitted for review.**



Submit Application

Cancel



# Grant Revisions



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| Grant#  | Application # | Status               | Department                                   | Grantor     | Match       | Total        | Submitted Date          | Submitted Time |
|---------|---------------|----------------------|----------------------------------------------|-------------|-------------|--------------|-------------------------|----------------|
| 1G11000 | AG11122-1     | Locked - Submitted   | Justice Assistance Grant (JAG) 2011          | \$91,890.00 | \$10,210.00 | \$102,100.00 | Thursday, June 23, 2011 | 3:16:00 PM     |
|         | T11490        | Edit - Not Submitted | RSAT 2011                                    | \$0.00      | \$0.00      | \$0.00       | N/A                     | N/A            |
|         | T11179        | Edit - Not Submitted | Justice Assistance Grant (JAG) 2011          | \$0.00      | \$0.00      | \$0.00       | N/A                     | N/A            |
|         | T10863        | Edit - Not Submitted | Project Safe Neighborhoods 2010              | N/A         | N/A         | N/A          | N/A                     | N/A            |
|         | T10862        | Edit - Not Submitted | Project Safe Neighborhoods 2010              | \$0.00      | \$0.00      | \$0.00       | N/A                     | N/A            |
|         | T10791        | Edit - Not Submitted | Forensic Science 2010                        | N/A         | N/A         | N/A          | N/A                     | N/A            |
|         | T10771        | Edit - Not Submitted | JJ Title V Local Delinquency Prevention 2010 | N/A         | N/A         | N/A          | N/A                     | N/A            |
|         | T091294       | Edit - Not Submitted | JABG 2009                                    | N/A         | N/A         | N/A          | N/A                     | N/A            |
|         | T10748        | Edit - Not Submitted | Formula Program 2010                         | N/A         | N/A         | N/A          | N/A                     | N/A            |
|         | T10541        | Edit - Not Submitted | RSAT 2010                                    | \$0.00      | \$0.00      | \$0.00       | N/A                     | N/A            |
|         | T10191        | Edit - Not Submitted | Justice Assistance Grant (JAG) 2010          | \$0.00      | \$0.00      | \$0.00       | N/A                     | N/A            |



Will receive a confirmation e-mail along with the approved status change that will read:

**From:** SCDPS-Grant Management Information System Notification  
(Do Not Reply)

**Sent:** Oct 8 2011 11:36AM

**To:** (Project director)

**CC:** (your assigned Program Coordinator)

**Subject:** Request for grant (1P11000) extension and/or revision status

We have reviewed and **approved** your budget revision and /or extension **#2** for grant *1P11000 - 'Gang Investigator'* with an effective date of *10/12/2011*.

If you have any questions regarding this email, please contact the Senior Accountant under this program.

Please print a copy of this email for your records.



# Training Approval Request



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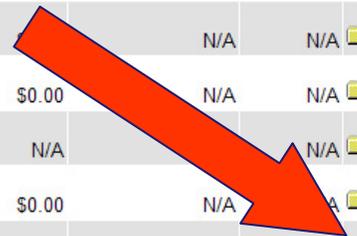
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| <a href="#">Grant#</a> | <a href="#">Application #</a> | <a href="#">Status</a> | <a href="#">Department</a>                   | <a href="#">Grantor</a> | <a href="#">Match</a> | <a href="#">Total</a> | <a href="#">Submitted Date</a> | <a href="#">Submitted Time</a> |  |
|------------------------|-------------------------------|------------------------|----------------------------------------------|-------------------------|-----------------------|-----------------------|--------------------------------|--------------------------------|--|
| 1G11000                | AG11122-1                     | Edit - Not Submitted   | Justice Assistance Grant (JAG) 2011          | \$91,890.00             | \$10,210.00           | \$102,100.00          | N/A                            | N/A                            |  |
|                        | T11490                        | Edit - Not Submitted   | RSAT 2011                                    | \$0.00                  | \$0.00                |                       | N/A                            | N/A                            |  |
|                        | T11179                        | Edit - Not Submitted   | Justice Assistance Grant (JAG) 2011          | \$0.00                  | \$0.00                | \$0.00                | N/A                            | N/A                            |  |
|                        | T10863                        | Edit - Not Submitted   | Project Safe Neighborhoods 2010              | N/A                     | N/A                   | N/A                   | N/A                            | N/A                            |  |
|                        | T10862                        | Edit - Not Submitted   | Project Safe Neighborhoods 2010              | \$0.00                  | \$0.00                | \$0.00                | N/A                            | N/A                            |  |
|                        | T10791                        | Edit - Not Submitted   | Forensic Science 2010                        | N/A                     | N/A                   | N/A                   | N/A                            | N/A                            |  |
|                        | T10771                        | Edit - Not Submitted   | JJ Title V Local Delinquency Prevention 2010 | N/A                     | N/A                   | N/A                   | N/A                            | N/A                            |  |
|                        | T091294                       | Edit - Not Submitted   | JABG 2009                                    | N/A                     | N/A                   | N/A                   | N/A                            | N/A                            |  |



**Only for grants with training in the budget.**



# Training Approval Request



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### Justice Assistance Grant (JAG) 2011

|                     |                                                           |
|---------------------|-----------------------------------------------------------|
| Grant Number:       | 1G11000                                                   |
| Application Number: | AG11122                                                   |
| Version:            | Revision 1 <input type="button" value="Create Revision"/> |
| County:             | RICHLAND                                                  |
| Begin Date:         | 7/1/2011                                                  |
| Ending Date:        | 6/30/2012                                                 |
| Project Title:      | Sample Grant                                              |
| Submitted Date:     |                                                           |
| Attachments:        | 0                                                         |

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# Training Approval Request



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## Training Requests

(Justice Assistance Grant (JAG) 2011, Grant No. 1G11000)

[New...](#) | [Delete](#) | [Print...](#)

| Created Date            | Course Name      | Status    |                           |  |                                   |
|-------------------------|------------------|-----------|---------------------------|--|-----------------------------------|
| 6/22/2011<br>3:52:58 PM | Grant Management | Submitted | <a href="#">Review...</a> |  | <a href="#">Attachments[1]...</a> |





# Training Approval Request

## Training Approval Request

As a reminder, requests for training not involving the expenditure of grant funds (such as classes at the Criminal Justice Academy) do not need prior approval. Class attendance should be noted on Progress Reports, and any certificates received should be submitted. Also, it is the responsibility of the sub-grant at the State Administrative Agency to ensure that there are adequate funds in the grant to attend the training event. This approval is for grammatic purposes only.

Grant Number:

Grant Project Title:

Agency Name:

Name of Course:

### Cost of Course

**Registration**  
 Amount:  Notes:   
\*List type of travel and cost details per person (airfare, ground transportation, parking, milage).

**Travel**  
 Amount:  Notes:

**Meals & Per Diem**  
 Amount:  Notes:

**Lodging**  
 Amount:  Notes:   
\*List number of rooms, muber of nights, and room rate.

Total Estimated Cost:

Date(s) of Course:

Course Location:

Course Provider:

<http://www.gsa.gov>

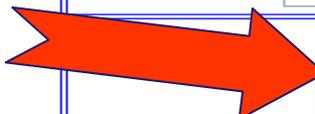
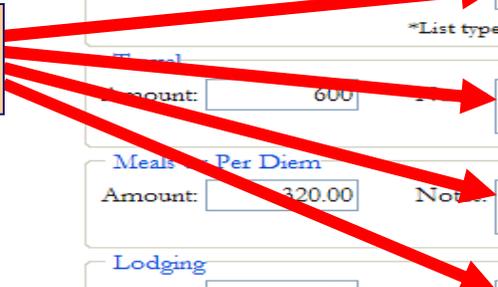
### Name of Person(s) Attending

[Add New...](#) | [Delete](#)

| <input type="checkbox"/> | Person Name | Position Title | Date Employed by Grant |
|--------------------------|-------------|----------------|------------------------|
|--------------------------|-------------|----------------|------------------------|

No Records

Give Breakdowns





# Training Approval Request

Save & Close    Cancel

### Training Approval Request

As a reminder, requests for training not involving the expenditure of grant funds (such as classes at the Criminal Justice Academy) do not need prior approval. Class attendance should be noted on Progress Reports, and any certificates received should be submitted. Also, it is the responsibility of the sub-grantee and not the State Administrative Agency to ensure that there are adequate funds in the grant to attend the training event. This approval is for programmatic purposes only.

Grant Number:

Grant Project Title:

Agency Name:

Name of Course:

**Attending Person**

Person Name:

Position Title:

Date Employed by Grant:  (mm/dd/yyyy)

Save    Cancel

**Cost of Course**

Registration  
Amount:

Travel  
Amount:     Notes:

Meals or Per Diem  
Amount:     Notes:

Lodging  
Amount:     Notes:

\*List number of rooms, muber of nights, and room rate.

**Total Estimated Cost:**

Date(s) of Course:

Course Location:



# Training Approval Request

### Travel

Amount:  Notes:

### Meals or Per Diem

Amount:  Notes:

### Lodging

Amount:  Notes:

\*List number of rooms, muber of nights, and room rate.

Total Estimated Cost:

Date(s) of Course:

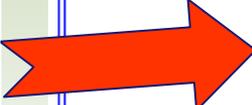
Course Location:

Course Provider:

### Name of Person(s) Attending

[Add New...](#) | [Delete](#)

| <input type="checkbox"/> | Person Name | Position Title   | Date Employed by Grant |                           |
|--------------------------|-------------|------------------|------------------------|---------------------------|
| <input type="checkbox"/> | Jay Ward    | CDV Investigator | 9/12/2011              | <a href="#">Update...</a> |
| <input type="checkbox"/> | Daws Butler | CDV Investigator | 9/12/2011              | <a href="#">Update...</a> |



Project Director Typed Name

\*  
Project Director Phone No.

**\*Note: This form must be accompanied by an attached agenda or course description that includes the cost of registration on any other fees, from the Course Provider, in order to be processed.**

Save & Close

Cancel



# Training Approval Request

### Travel

Amount:

Notes:

### Meals or Per Diem

Amount:

Notes:

### Lodging

Amount:

Notes:

\*List number of rooms, muber of nights, and room rate.

Total Estimated Cost:

Date(s) of Course:

Course Location:

Course Provider:

### Name of Person(s) Attending

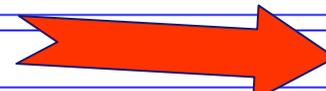
[Add New...](#) | [Delete](#)

| <input type="checkbox"/> | Person Name | Position Title   | Date Employed by Grant |                           |
|--------------------------|-------------|------------------|------------------------|---------------------------|
| <input type="checkbox"/> | Jay Ward    | CDV Investigator | 9/12/2011              | <a href="#">Update...</a> |
| <input type="checkbox"/> | Daws Butler | CDV Investigator | 9/12/2011              | <a href="#">Update...</a> |

Project Director Typed Name

\*  
Project Director Phone No.

**\*Note: This form must be accompanied by an attached agenda or course description that includes the cost of registration on any other fees, from the Course Provider, in order to be processed.**



Save & Close

Cancel



# Training Approval Request



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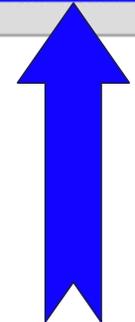
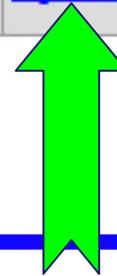
## Training Requests

(Justice Assistance Grant (JAG) 2011, Grant No. 1G11000)

[New...](#) | [Delete](#) | [Print...](#)

|                          | Created Date            | Course Name                 | Status        |                           |                        |                                   |
|--------------------------|-------------------------|-----------------------------|---------------|---------------------------|------------------------|-----------------------------------|
| <input type="checkbox"/> | 6/22/2011<br>3:52:58 PM | Grant Management            | Submitted     | <a href="#">Review...</a> |                        | <a href="#">Attachments[1]...</a> |
| <input type="checkbox"/> | 6/23/2011<br>4:10:32 PM | CDV - Protecting The Victim | Not submitted | <a href="#">Update...</a> | <a href="#">Submit</a> | <a href="#">Attachments[0]...</a> |

**Must attach or fax (803-896-8714)  
agenda before submitting**





# Training Approval Request

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GMS - Training Request [My Attachments] -- Webpage Dialog

**Training Request Attachments**  
(Course: CDV - Protecting The Victim)

File name:

0 file(s)

Notes:  
The maximum size of the attachment that can be uploaded is 4.00 MB.  
The maximum number of the attachments that can be uploaded is 10.  
(Accepted files: \*.bmp, \*.doc, \*.pdf, \*.jpeg, \*.jpg, \*.rtf, \*.txt, \*.xls, \*.png, \*.gif)

[New...](#)

|                          |      |
|--------------------------|------|
| <input type="checkbox"/> | 6/3: |
| <input type="checkbox"/> | 6/4: |

http://pub6/GMIS\_TrainingApprovals/TRAttachments.aspx Local intranet



# Training Approval Request



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[Close](#)

## Training Request Attachments

(Course: CDV - Protecting The Victim )

File name:

|                          | File Name                             | Creation Time        | Size (MB) |
|--------------------------|---------------------------------------|----------------------|-----------|
| <input type="checkbox"/> | <a href="#">CDV Training 2011.pdf</a> | 6/24/2011 8:12:08 AM | 0.01      |

1 file(s)

Notes:

The maximum size of the attachment that can be uploaded is 4.00 MB.

The maximum number of the attachments that can be uploaded is 10.

(Accepted files: \*.bmp, \*.doc, \*.pdf, \*.jpeg, \*.jpg, \*.rtf, \*.txt, \*.xls, \*.png, \*.gif)



# Training Approval Request



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## Training Requests

(Justice Assistance Grant (JAG) 2011, Grant No. 1G11000)

[New...](#) | [Delete](#) | [Print...](#)

|                          | Created Date            | Course Name                 | Status        |                           |                        |                                   |
|--------------------------|-------------------------|-----------------------------|---------------|---------------------------|------------------------|-----------------------------------|
| <input type="checkbox"/> | 6/22/2011<br>3:52:58 PM | Grant Management            | Submitted     | <a href="#">Review...</a> |                        | <a href="#">Attachments[1]...</a> |
| <input type="checkbox"/> | 6/23/2011<br>4:10:32 PM | CDV - Protecting The Victim | Not submitted | <a href="#">Update...</a> | <a href="#">Submit</a> | <a href="#">Attachments[1]...</a> |





# Training Approval Request



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## Training Requests

(Justice Assistance Grant (JAG) 2011, Grant No. 1G11000)

[New...](#) | [Delete](#) | [Print...](#)

|                          | Created Date            | Course Name                 | Status    |                           |  |                                   |
|--------------------------|-------------------------|-----------------------------|-----------|---------------------------|--|-----------------------------------|
| <input type="checkbox"/> | 6/22/2011<br>3:52:58 PM | Grant Management            | Submitted | <a href="#">Review...</a> |  | <a href="#">Attachments[1]...</a> |
| <input type="checkbox"/> | 6/23/2011<br>4:10:32 PM | CDV - Protecting The Victim | Submitted | <a href="#">Review...</a> |  | <a href="#">Attachments[1]...</a> |





# Training Approval Request

Date(s) of Course:

Course Location:

Course Provider:

## Name of Person(s) Attending

[Add New...](#) | [Delete](#)

| <input type="checkbox"/> | Person Name | Position Title   | Date Employed by Grant |                           |
|--------------------------|-------------|------------------|------------------------|---------------------------|
| <input type="checkbox"/> | Jay Ward    | CDV Investigator | 09/12/2011             | <a href="#">Update...</a> |
| <input type="checkbox"/> | Daws Butler | CDV Investigator | 09/12/2011             | <a href="#">Update...</a> |

Project Director Typed Name

Project Director Phone No.

**\*Note: This form must be accompanied by an attached agenda or course description that includes the cost of registration on any other fees, from the Course Provider, in order to be processed.**

Request Status:  Approved  Denied

Comments:

Enjoy the trip.

Program Coordinator Printed Name

Phone #

Date



# Training Approval Request



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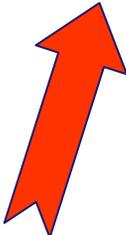
### Justice Assistance Grant (JAG) 2011

|                     |                                                           |
|---------------------|-----------------------------------------------------------|
| Grant Number:       | 1G11000                                                   |
| Application Number: | AG11122                                                   |
| Version:            | Revision 1 <input type="button" value="Create Revision"/> |
| County:             | RICHLAND                                                  |
| Begin Date:         | 7/1/2011                                                  |
| Ending Date:        | 6/30/2012                                                 |
| Project Title:      | Sample Grant                                              |
| Submitted Date:     | 6/23/2011 3:16:00 PM                                      |
| Attachments:        | 0                                                         |

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# Training Approval Request



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## Training Requests

(Justice Assistance Grant (JAG) 2011, Grant No. 1G11000)

[New...](#) | [Delete](#) | [Print...](#)

|                          | Created Date            | Course Name                 | Status    |                           |  |                                   |
|--------------------------|-------------------------|-----------------------------|-----------|---------------------------|--|-----------------------------------|
| <input type="checkbox"/> | 6/22/2011<br>3:52:58 PM | Grant Management            | Submitted | <a href="#">Review...</a> |  | <a href="#">Attachments[1]...</a> |
| <input type="checkbox"/> | 6/23/2011<br>4:10:32 PM | CDV - Protecting The Victim | Approved  | <a href="#">Review...</a> |  | <a href="#">Attachments[1]...</a> |





Will receive a confirmation e-mail along with the approved status change that will read:

**From:** SCDPS-Grant Management Information System Notification  
(Do Not Reply)

**Sent:** Oct 8 2011 11:36AM

**To:** (Project director)

**Subject:** SCDPS Office of Justice Programs Training Request Status Update

Your training request submitted through GMIS for grant *1P11000*, titled CDV Investigator has been **approved** with a date of 10/10/2011.

Title of Training: *Gang Investigators Association Conference*.

Name of Person(s) Attending: Inv. Bonnie Burns.

Please contact the Office of Justice Programs for further information.



# Printout/Signature Page Changes

## JUSTICE ASSISTANCE GRANT PROGRAM TERMS AND CONDITIONS

NOTE: THE GRANT TERMS AND CONDITIONS MUST BE SUBMITTED WITH GRANT APPLICATION

GRANT NO.

### CERTIFICATION BY PROJECT DIRECTOR \*

I certify that I understand and agree to comply with the general and fiscal terms and conditions of this application including special conditions; to comply with provisions of the Act governing these funds and all other federal laws; that all information presented is correct; that there has been appropriate coordination with affected agencies; that I am duly authorized by the Applicant to perform the tasks of Project Director as they relate to the terms and conditions of this grant application; that costs incurred prior to grant approval may result in the expenses being absorbed by the subgrantee; and, that the receipt of grantor funds through the State Funding Agency will not supplant state or local funds.

Prefix:

First Name:

Middle Name:

Last Name:

Suffix:

Title:

Agency:

Mailing Address:

City:

State:

10 Digit Zip:

Phone Number:

**Please complete your  
workshop evaluation form in  
the back flap of your notebook.**

**Thank you !**

**Please drive safely**

***OJP***

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