Collin County Grant Summary Form

Department Name	Submit completed form along with one electronic copy of the					
Collin County Juvenile Probat	grant application and all supporting documentation to the					
Contact Person (Grant Liais	Auditor's Office not less than 14 days prior to the scheduled					
Lynn Hadnot			Commissioner Court meeting. If you have any questions			
Title	Phone / Extens	sion	contact Janna Caponera at (972) 548-4638.			
Director	x6470	51011				
Director	X0470	Grant Do	scription			
Grant Title and Funding Yea	ar .	Grant De		a Source	Applica	tion Type
Specialty Court Program, FY			Funding Source Application State New Grant			
			Federal	III.		
Grantor (include sub-granting agencies) Office of the Governor (OOG), Criminal Justice Division						ont
Chice of the Governor (CCG)	DIVISION (C3D)	Other:				
		Payment Method ✓ Cost Reimbursement ☐ Other				
Application/Assert Doubling	Dominated Co	manna Carret		ibursement	U Other:	
Application/Award Deadline	-	Requested Comm. Court		Grant Period		
February 20, 2017	Febluary	February 20, 2017		September 1, 2017 to August 31, 2018		
Brief Description Provide out-patient substance	-1		!I- 00AD D			
Grant Categories /	Federal Funds	State Funds	Local Funds	County	In-Kind	Total
Funding Sources	r odoran r ando		Local Fallac	Match	Match	
Personnel						\$ -
Operating	\$ 50,000.00					\$ 50,000.00
Capital Equipment						\$ -
Indirect Costs						\$ -
Total	\$ 50,000.00	\$ -	\$ -	\$ -	\$ -	\$ 50,000.00
# of FTEs						0
Performance Mea		•	Current FY Progress to Date			Next FY
Applicable Outcome Measures Achieve graduation/program completion rate ≥ 70%		Q1	Q2	Q3	Q4	Projected
Demonstrate re-offense rate s	20% for					
program graduates 6 months						
Assess 20 juveniles for progra						
Provide counseling / treatmen				+		
Provide counseling / treatment for 8 program participants						
The Department named above for the management of any further forth by the Grantor and its redepartments. To that end, please Grant Summary Form Memo of request to Co Electronic copy of the Carrow Approval to apply Cour All attachments, back-to-	nds awarded to the lated agencies or ease find enclosed mmissioner Court original, completed to Order (for award	ne County unde agents, as well d the following in t for application/ d application/aw d only)	r this grant, and as those of the tems for initial re /award acceptar /ard	will adhere to a County, and its eview: nce and approv	any polices and s financial and a	procedures set
Completed by:						
Lynn Hadnot						
Department Head / Designee Printe	ed Name	Signature			Date	,

Grant Resource-Benefit Summary

Grant Title			Contact Person	n (Grant Liaison)	☐ Preliminary	
Specialty Court Program, FY 201	8		Lynn Hadnot		☐ Final	
Grant Period			Phone / Ext	Department		
September 1, 2017 to	August 3	1, 2018	x6470	Collin County Juvenile Probation Services		
COUNTY RESOURCES REQUI		ا عام معاداً ا	Matala Oassaa	Daniella de Octubra de Olivera		
Match	Amount	Identity	Match Source	Benefits to County and Citizens \$50,000 to provide out-patient substance about	use treatment for juvenile	
1) Cash	\$ -	<u> </u>		SOAR Program participants	use treatment for juverille	
2) In-Kind	\$ -					
✓ No Match Required						
Implementation / Start Up	Amount	Dε	escription			
1) Equipment						
2) Training						
3) Inter-departmental / Other:		_				
☑ No Implem / Start-up Costs						
Operational / Maintenance	Amount	Dε	escription			
1) Recurring Maintenance						
2) Salary / Benefits						
3) Continuing Ed / Training						
4) Office / Program Space						
5) Travel						
6) Other:						
☑ No Oper / Maintenance Cost	5					
NON-COUNTY RESOURCES R						
Match	Amount	Identify	Match Source			
1) Voluntary / Donation		I				