Collin County Grant Summary Form

	Oomin C	Journey Gra							
Department Name	Submit completed form along with one electronic copy of the								
Juvenile Probation Department	grant application and all supporting documentation to the								
Contact Person (Grant Liaiso	Auditor's Office not less than 14 days prior to the scheduled								
H. Lynn Hadnot			Commissioner Court meeting. If you have any questions contact Janna Caponera at (972) 548-4638.						
Title	Phone / Exten	sion	Contact Janna	Caponera at (31	2) 340-4030.				
Director	6473								
		Grant De	scription						
Grant Title and Funding Year Funding Source Application Type									
Grant R (Regionalization)	✓ State ✓ New Grant								
Grantor (include sub-granting agencies)			Federal		☐ Renewal				
gramming agonology			Other:		Amendme	ent			
Texas Juvenile Justice Departr		<u> </u>	Paymen	t Method					
Toxas suverine susince Department			☐ Cost Reimbursement ☐ Other:						
Application/Award Deadline Requested Comm. Court			Grant Period						
NA	Trequested 00	iiiii. Oodit	Septembe	r 1 2017 to	August	31, 2019			
Brief Description			Septembe	r 1, 2017 to	August	31, 2019			
-	nauturant has au	uandad a anaat f	o v 4h o m voh o o o	of a validated vi	als accomment	to al for all			
The Texas Juvenile Justice De									
referred youth. Grant funding	•					PACT Full			
Screen, MAYSI-II, and PREA assessments, maitenance cost, and for training for departmental staff.									
Grant Categories /				County	In-Kind				
Funding Sources	Federal Funds	State Funds	Local Funds	Match	Match	Total			
Personnel				matori	Widton	\$ -			
Operating						\$ -			
Capital Equipment		\$ 50,861.00				\$ 50,861.00			
Indirect Costs	<u> </u>	\$ 50,661.00				\$ 50,861.00			
		.	•	•	•	· · · · · · · · · · · · · · · · · · ·			
Total	\$ -	\$ 50,861.00	\$ -	\$ -	\$ -	\$ 50,861.00			
# of FTEs						0			
Bartanna Mara			O FV D			No. of EV			
Performance Meas				ogress to Date		Next FY			
Applicable Outcome M	easures	Q1	Q2	Q3	Q4	Projected			
The Department named above	is applying for t	he Grant Progra	m named above	and if awarde	d will accept fu	ll responsibility			
for the management of any fun									
forth by the Grantor and its rela		•	•						
departments. To that end, plea									
☑ Grant Summary Form		3							
✓ Memo of request to Con	nmissioner Cour	t for application	award acceptar	nce and approva	al				
☑ Electronic copy of the or									
Approval to apply Court Order (for award only)									
All attachments, back-up			s to be submitte	d to the Grantor					
Completed by:									
H. Lynn Hadnot, Director	_			_	June 12, 2018				
Department Head / Designee Printed	l Name	Signature			Date				

Grant Resource-Benefit Summary

Grant Title Grant R (Regionalization) Grant Period September 1, 2017 to August 31, 2019			Contact Person	(Grant Liaison)	☐ Preliminary
			H. Lynn Hadnot		
			Phone / Ext 6473	Department	
				Juvenile Probation Department	
COUNTY RESOURCES REQUIR	ED				
Match	Amount	Identify M	latch Source	Benefits to County and Citizens	
1) Cash	\$ -				
2) In-Kind	\$ -				
✓ No Match Required					
Implementation / Start Up	Amount	Des	cription		
1) Equipment					
2) Training					
3) Inter-departmental / Other:					
☐ No Implem / Start-up Costs					
Operational / Maintenance	Amount	Des	cription		
1) Recurring Maintenance					
2) Salary / Benefits					
3) Continuing Ed / Training					
4) Office / Program Space					
5) Travel					
6) Other:					
☐ No Oper / Maintenance Costs					
NON-COUNTY RESOURCES RE	QUIRED				

Identify Match Source

Amount

Match

1) Voluntary / Donation