**Collin County Grant Summary Form** 

	Collin	Journey Gra			101 1 1			
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 Liaison)			Auditor's Office not less than 14 days prior to the scheduled Commissioner Court meeting. If you have any questions					
H. Lynn Hadnot			-contact Janna Caponera at <b>(972) 548-4638</b> .					
Title	Phone / Exten	sion		- apo a. (0)	_, 0 .0 .000.			
Director	X6473							
		Grant De	scription					
Grant Title and Funding Ye	1			tion Type				
Grant R-RDA Services FY18			_ ☑ State ☑ New Gr			nt		
Grantor (include sub-granting agencies)			Federal		Renewal			
			Other:		☐ Amendm	ent		
			Payment Method					
			✓ Cost Reimbursement					
Application/Award Deadlir	ne Requested Co	Requested Comm. Court		Grant Period				
NA	July 9	, 2018	June 26, 2018 to June 25, 2019					
Brief Description								
Grant funding will be used to	pay for residentia	I services for a	Collin County yo	outh who is being	g diverted from	state		
Grant Categories /				County	In-Kind			
Funding Sources Personnel	Federal Funds	State Funds	Local Funds	Match	Match	Total		
Operating		\$ 59,239.50				\$ 59,239.50		
Capital Equipment		Ψ 00,200.00				\$ -		
Indirect Costs						\$ -		
Total	\$ -	\$ 59,239.50	\$ -	\$ -	\$ -	\$ 59,239.50		
# of FTEs	<u> </u>	Ψ 03,203.00	Ψ	Ψ	*	0		
Performance Me	easures		Current FY Pr	ogress to Date		Next FY		
Applicable Outcome	Measures	Q1	Q2 Q3		Q4	Projected		
					<u> </u>			
The Department named aborder the management of any to forth by the Grantor and its redepartments. To that end, possible Grant Summary Form Memo of request to Cook Electronic copy of the Approval to apply Cook All attachments, back	funds awarded to the related agencies or oblease find enclose or commissioner Courte original, complete out Order (for award	he County unde agents, as well d the following in t for application/awd 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:	ny polices and financial and a	procedures set		
Completed by:								
H. Lynn Hadnot, Director					June 20, 2018	3		
Department Head / Designee Prin	nted Name	Signature			Date			

## **Grant Resource-Benefit Summary**

Grant Title Grant R-RDA Services FY18 Grant Period			Contact Person	(Grant Liaison)	☐ Preliminary
			H. Lynn Hadnot		Final
			Phone / Ext	Department	
June 26, 2018 to	June 25, 2019		X6473	Juvenile Probation Department	
COUNTY RESOURCES REQUIR	Amount	Identify M	atch Source	Benefits to County and Citizens	
1) Cash	\$ -				
2) In-Kind	\$ -				
✓ No Match Required					
Implementation / Start Up	Amount	Desc	cription		
1) Equipment					
2) Training					
3) Inter-departmental / Other:					
☐ No Implem / Start-up Costs					
Operational / Maintenance	Amount	Desc	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