## Illin County Grant Summary Form

| Department Name  |               |                             | Submit comple         | ted form alor   | na with one electro     | nic copy of the  |
|--|---------------|-----------------------------|-----------------------|-----------------|-------------------------|--|
| Juvenile Probation Departmen   | t             |                             |                       |                 | porting document        |  |
| Contact Person (Grant Liais  |               |                             |                       |                 | n 14 days prior to      |  |
| H. Lynn Hadnot   | ,             |                             |                       |                 | ng. If you have an      | y questions  |
| Title  | Phone / Exten | sion                        | contact Janna         | Caponera at     | <b>(972) 548-4638</b> . |  |
| Director   | 6473          |                             |                       |                 |                         |  |
| Birottor   | 0110          | Grant De                    | scription             |                 |                         |  |
| Grant Title and Funding Yea  | r             |                             | -                     | g Source        | Applica                 | tion Type  |
| Grant R - Diversion Alterantive  |               |                             | ✓ State               |                 | ✓ New Gra               | ••   |
| Grantor (include sub-grantir   |               |                             | Federal               |                 | Renewal                 |  |
| Texas Juvenile Justice Depart  | /             |                             | Other:                |                 | Amendm                  | ent  |
|  |               |                             |                       | Pavm            | ent Method              |  |
|  |               |                             | ✓ Cost Reim           | bursement       | Other:                  |  |
| Application/Award Deadline   | Requested Co  | mm. Court                   | Grant Period          |                 |                         |  |
| NA   | -             | er 24, 2018                 | Septembe              | r 5, 2018       | to Septemb              | per 5, 2019  |
| Brief Description  |               | ,                           |                       | -,              |                         |  |
|  |               |                             |                       |                 |                         |  |
|  |               |                             |                       |                 |                         |  |
| Grant Categories /   | Federal Funds | State Funds                 | Local Funds           | County          | In-Kind<br>Match        | Total  |
| Funding Sources  | Federal Funds |                             | Local Funds           | County<br>Match | In-Kind<br>Match        |  |
| Funding Sources<br>Personnel   | Federal Funds | State Funds<br>\$43,821.00  | Local Funds           | -               |                         | \$ 43,821.00   |
| Funding Sources<br>Personnel<br>Operating  | Federal Funds |                             | Local Funds           | -               |                         | \$ 43,821.00<br>\$ -   |
| Funding Sources<br>Personnel<br>Operating<br>Capital Equipment   | Federal Funds |                             | Local Funds           | -               |                         | \$ 43,821.00<br>\$ -<br>\$ -   |
| Funding Sources<br>Personnel<br>Operating  |               | \$43,821.00                 |                       | Match           | Match                   | \$ 43,821.00<br>\$ -<br>\$ -<br>\$ -<br>\$ -                         |
| Funding Sources<br>Personnel<br>Operating<br>Capital Equipment<br>Indirect Costs   | Federal Funds | \$43,821.00                 |                       | -               |                         | \$ 43,821.00<br>\$ -<br>\$ -<br>\$ -<br>\$ -                         |
| Funding Sources<br>Personnel<br>Operating<br>Capital Equipment<br>Indirect Costs<br>Total<br># of FTEs                     | \$ -          | \$43,821.00                 | \$-                   | Match           | Match                   | \$ 43,821.00<br>\$ -<br>\$ -<br>\$ -<br>\$ -<br>\$ 43,821.00<br>0    |
| Funding Sources<br>Personnel<br>Operating<br>Capital Equipment<br>Indirect Costs<br>Total                                  | \$ -          | \$43,821.00                 |                       | Match           | Match                   | \$ 43,821.00<br>\$ -<br>\$ -<br>\$ -<br>\$ 43,821.00<br>0<br>Next FY |
| Funding Sources<br>Personnel<br>Operating<br>Capital Equipment<br>Indirect Costs<br>Total<br># of FTEs                     | \$ -          | \$43,821.00                 | \$-                   | Match           | Match                   | \$ 43,821.00<br>\$ -<br>\$ -<br>\$ -<br>\$ -<br>\$ 43,821.00<br>0    |
| Funding Sources<br>Personnel<br>Operating<br>Capital Equipment<br>Indirect Costs<br>Total<br># of FTEs<br>Performance Meas | \$ -          | \$43,821.00<br>\$ 43,821.00 | \$ -<br>Current FY Pr | Match<br>\$ -   | Match                   | \$ 43,821.00<br>\$ -<br>\$ -<br>\$ -<br>\$ 43,821.00<br>0<br>Next FY |
| Funding Sources<br>Personnel<br>Operating<br>Capital Equipment<br>Indirect Costs<br>Total<br># of FTEs<br>Performance Meas | \$ -          | \$43,821.00<br>\$ 43,821.00 | \$ -<br>Current FY Pr | Match<br>\$ -   | Match                   | \$ 43,821.00<br>\$ -<br>\$ -<br>\$ -<br>\$ 43,821.00<br>0<br>Next FY |
| Funding Sources<br>Personnel<br>Operating<br>Capital Equipment<br>Indirect Costs<br>Total<br># of FTEs<br>Performance Meas | \$ -          | \$43,821.00<br>\$ 43,821.00 | \$ -<br>Current FY Pr | Match<br>\$ -   | Match                   | \$ 43,821.00<br>\$ -<br>\$ -<br>\$ -<br>\$ 43,821.00<br>0<br>Next FY |
| Funding Sources<br>Personnel<br>Operating<br>Capital Equipment<br>Indirect Costs<br>Total<br># of FTEs<br>Performance Meas | \$ -          | \$43,821.00<br>\$ 43,821.00 | \$ -<br>Current FY Pr | Match<br>\$ -   | Match                   | \$ 43,821.00<br>\$ -<br>\$ -<br>\$ -<br>\$ 43,821.00<br>0<br>Next FY |
| Funding Sources<br>Personnel<br>Operating<br>Capital Equipment<br>Indirect Costs<br>Total<br># of FTEs<br>Performance Meas | \$ -          | \$43,821.00<br>\$ 43,821.00 | \$ -<br>Current FY Pr | Match<br>\$ -   | Match                   | \$ 43,821.00<br>\$ -<br>\$ -<br>\$ -<br>\$ 43,821.00<br>0<br>Next FY |
| Funding Sources<br>Personnel<br>Operating<br>Capital Equipment<br>Indirect Costs<br>Total<br># of FTEs<br>Performance Meas | \$ -          | \$43,821.00<br>\$ 43,821.00 | \$ -<br>Current FY Pr | Match<br>\$ -   | Match                   | \$ 43,821.00<br>\$ -<br>\$ -<br>\$ -<br>\$ 43,821.00<br>0<br>Next FY |

The Department named above is applying for the Grant Program named above, and if awarded, will accept full responsibility for the management of any funds awarded to the County under this grant, and will adhere to any polices and procedures set forth by the Grantor and its related agencies or agents, as well as those of the County, and its financial and administrative departments. To that end, please find enclosed the following items for initial review:

- ✓ Grant Summary Form
  ✓ Memo of request to Commissioner Court for application/award acceptance and approval
  ✓ Electronic copy of the original, completed application/award
- Approval to apply Court Order (for award only)
- All attachments, back-up documentation or amendments to be submitted to the Grantor

| Completed by:                           |           |                   |
|---|-----------|-------------------|
| H. Lynn Hadnot, Director                |           | September 5, 2018 |
| Department Head / Designee Printed Name | Signature | Date              |

## Grant Resource-Benefit Summary

| Grant Title                  |           |                   | Contact Person | (Grant Liaison)               |
|------------------------------|-----------|-------------------|----------------|-------------------------------|
| Grant R - Diversion Alterant | tive Plan |                   | H. Lynn Hadnot |                               |
| Grant Period                 |           |                   | Phone / Ext    | Department                    |
| September 5, 2018            | to        | September 5, 2019 | 6473           | Juvenile Probation Department |

| Preliminary |
|-------------|
| Final       |

## COUNTY RESOURCES REQUIRED

| COUNTY RESOURCES REQUIR          | ED     |                       |
|----------------------------------|--------|-----------------------|
| Match                            | Amount | Identify Match Source |
| 1) Cash                          | \$-    |                       |
| 2) In-Kind                       | \$-    |                       |
| No Match Required                | -      |                       |
|                                  |        |                       |
| Implementation / Start Up        | Amount | Description           |
| 1) Equipment                     |        |                       |
| 2) Training                      |        |                       |
| 3) Inter-departmental / Other:   |        |                       |
| □ No Implem / Start-up Costs     |        |                       |
|                                  |        |                       |
| <b>Operational / Maintenance</b> | Amount | Description           |
| 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          |        |                       |
| Match                            | Amount | Identify Match Source |
| 1) Voluntary / Donation          |        |                       |
|                                  | LI     |                       |