Collin County Grant Summary Form

D		Journey Gru	Cubasit samula	7		:
Department Name	Submit completed form along with one electronic copy of the					
Sheriff's Office	grant application and all supporting documentation to the					
Contact Person (Grant Liais	Auditor's Office not less than 14 days prior to the scheduled Commissioner Court meeting. If you have any questions					
Tami McCullough		Caponera at (97		iy questions		
Title	Phone / Extens	sion	Sortast Garma	caponora at (C)	_, 0 10 1000.	
Captain	5209					
		Grant De	scription			
Grant Title and Funding Yea	ar		Funding	g Source	Applica	ation Type
Law Enforcement Mental Hea	ılth and Wellness	Grant	☐ State		✓ New Gra	ınt
Grantor (include sub-granti	✓ Federal		☐ Renewal			
Department of Justice Community Oriented Policing Services			☐ Other: ☐ Amendment			
· .		Pavmen	t Method			
	✓ Cost Reimbursement ☐ Other:					
Application/Award Deadline	Requested Co	mm Court	Grant Period	ibaroomont	U Other.	
June 24,2025	June 2		October	1, 2025 to	Sentemb	per 30, 2027
	Julie 2	5,2025	October	1, 2025) Gepterni	Jei 30, 2021
Brief Description The Collin County Sheriff's Of	ffico roccanizas #	nat ita ampleus :	o oro oublested	to the horneful	offooto of atra=	n nonneisted
with critical incidents. To mini wellness program for peer sup support training and mental a for and recovery from critical i	pport which includend physical wellne	les wellness ch	ecks, critical inc	ident debriefing	, resiliency traii	ning, peer
Grant Categories / Funding Sources	Federal Funds	State Funds	Local Funds	County Match	In-Kind Match	Total
Personnel						\$ -
Operating	\$ 152,040.00					\$ 152,040.00
Capital Equipment	↓ 102,010100					\$ -
Indirect Costs						\$ -
Total	\$ 152,040.00	\$ -	\$ -	\$ -	\$ -	\$ 152,040.00
# of FTEs	\$ 132,040.00	Ψ -	Ψ -	Ψ -		0
# 011 123						
Performance Mea	SIIrAS		Current FY Pr	ogress to Date		Next FY
Applicable Outcome N		Q1	Q2 Q3 Q4			Projected
Provide serivices to Collin Co		QT	Q2	Q3 	Q 4	Frojected
Officers/families.	y =					
						+
					1	
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 Capproval to apply Cour All attachments, back-to-	ands awarded to the lated agencies or ease find enclosed ommissioner Courtriginal, completed torder (for award	ne County unde agents, as well d the following i 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 approva	ny polices and financial and a	procedures set
Completed by:						
Sheriff Jim Skinner						
Department Head / Designee Prints	ad Name	Signature			Date	

Grant Resource-Benefit Summary

Grant Title				Contact Person (Grant Liaison)					
Law Enforcement Mental Health and Wellness Grant			Tami McCullough		Final				
Grant Period				Phone / Ext	Department				
October 1, 2025 t	0	September 30, 2027		5209	Sheriff's Office				
COUNTY RESOURCES REQU Match	IRED	Amount	Identify	Match Source	Benefits to County and Citizens				
1) Cash	\$	Amount	Identily	Water Godrec	Grant does not require a match. It's a two year grant. First year: \$76,020.00. Second year: \$76,020.00 Total: \$152,040.00 No match				
i) Casii	Φ	-							
2) In-Kind	\$	-			required.				
☑ No Match Required									
Implementation / Start Up		Amount	De	escription					
1) Equipment									
2) Training									
3) Inter-departmental / Other:									
☑ No Implem / Start-up Costs									
Operational / Maintenance		Amount	De	escription					
1) Recurring Maintenance									
2) Salary / Benefits									
3) Continuing Ed / Training									
4) Office / Program Space									
5) Travel									
6) Other:									
☑ No Oper / Maintenance Cos	ts								
NON-COUNTY RESOURCES F Match	REQU	I IRED Amount	ldentify	Match Source					
Voluntary / Donation		. anount							