**Dallas County Juror Fund Application and Instructions**

**Community-Based Organization**

Dallas County jurors have the option of contributing their juror fund stipend to help at risk youth in the Dallas County Juvenile Department and the foster care system. The Youth Services Advisory Board (YSAB) oversees the use of the Dallas County Juror Fund for special projects to address specific concerns related to juvenile crime prevention. In order to be eligible for YSAB recommendation, organizations serving youth involved with the Dallas County Juvenile Department must complete the following application.

**Submission Instructions:**

1. Applicants must answer all questions
2. Length of answers have to adhere to the specified word limit indicated in the question
3. Responses must be typed in Calibri (Body) character, font size 11 points, single space. All documents included in the application must be 8 ½” by 11" in size.
4. Applicants must submit the following documents electronically by grant due date submission:
	1. Completed application form (pdf format only) with the requestor’s original signature
	2. The two most recently filed IRS 990 forms
	3. Latest verification of tax-exempt status from the IRS
	4. Certificate of Formation from the State of Texas
	5. Organization’s current operating budget and year-to-date financial statements
	6. Current list of board members
5. Organizations **whose applications are approved for funding**, will receive their monies only if they are in compliance with the following requirements:
	1. Organization representatives in contact with youth under juvenile department supervision must complete the Dallas County Juvenile Department volunteer training and maintain all current Prison Rape Elimination Act standards. This includes a training session and a background check. The organization must be able to maintain these standards and requirements during the grant period.
	2. Submit electronically:
		1. Active Workers Compensation Insurance
			1. Bodily injury by accident – FIVE HUNDRED THOUSAND AND NO/100 DOLLARS ($500,000.00) each accident;
			2. Bodily injury by disease - FIVE HUNDRED THOUSAND AND NO/100 DOLLARS $500,000.00) each employee; and
			3. Bodily injury by disease - FIVE HUNDRED THOUSAND AND NO/100 DOLLARS ($500,000.00) policy limit
		2. Active Commercial General Liability Insurance
			1. It is Contractor’s responsibility to make sure that it has a comprehensive general liability and professional insurance with “personal injury” coverage, with minimum limits of $1,000.000 for bodily injuries to or death of a person, and an aggregate of $500,000.00 for any one (1) occurrence is in place for the Contractor program.
			2. There is also an additional umbrella policy of $2,000,000 for events related to the covered activity but not outlined in the policy.
6. The Dallas County Juvenile Department maintains the right to take ownership of non-expendable equipment (equipment that can have a life of more than two years) purchased with juror grant funds once the organization ends programming with the Dallas County Juvenile Department. Electronic monitoring items are excluded from this provision.
7. Organizations must report their project status semiannually.
8. Funding is for one year, starting 10/01/2023 and ending on 09/30/2024
9. Email completed application packet to grants.dcjd@dallascounty.org no later than 5:00 PM CST on April 21st, 2023

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| **Questions regarding the application process may be directed to:** Dr. Julie Childers Deputy Director of Executive and Administrative Services Dallas County Juvenile Department Julie.Childers@dallascounty.org 214-698-4376 |

**Dallas County Juror Fund Application Form**

**You may hover over  *Info* for more information when applicable**

1. **Profile**
	1. ***Organization Name***

Click or tap here to enter text.

* 1. ***Organization Website:***

Click or tap here to enter text.

* 1. ***Address:***

 Click or tap here to enter text.

* 1. ***Project Title:***

Click or tap here to enter text.

* 1. ***Application Type:***

Choose an item.

* 1. ***Amount Requested:***

Click or tap here to enter text.

* 1. ***Applicant Name and Title:***

Click or tap here to enter text.

* 1. ***Applicant Contact Email:***

Click or tap here to enter text.

* 1. ***Applicant Contact Phone number:***

Click or tap here to enter text.

* 1. ***Organization Mission Statement***

Click or tap here to enter text.

* 1. ***Organization History (including the year it was founded, and list current programs)*** *(maximum 250 words).*

Click or tap here to enter text.

* 1. ***Has your organization worked with any juvenile departments within the state of Texas?***

Choose an item.

**If yes, please indicate when, where, and how long the project was held. Include details of services provided by your project for those juvenile departments.** *(Limit of 250 words)*

Click or tap here to enter text.

* 1. ***How did you hear about this funding source?***

Click or tap here to enter text.

1. **Proposed Project**

*(Up to 50 points – combined sections a/b/c/d)*

* 1. ***Problem Statement & Supporting Data*** *(Up to 20 points; Maximum 600 words)* ***- Info***

Click or tap here to enter text.

* 1. ***Target Group*** *(Up to 5 points - Maximum 250 words)* ***- Info***

Click or tap here to enter text.

* 1. ***Project Approach and Activities*** *(Up to 20 points; Maximum 500 words)* ***- Info***

Click or tap here to enter text.

* 1. ***Indicate where the project will take place*** *(no score allocated)*

Click or tap here to enter text.

* 1. ***Capacity and Capabilities*** *(Up to 5 points – Maximum 500 words)-* ***Info***

Click or tap here to enter text.

1. **Performance Management**

*(Up to 30 points – combined sections a/b/c/d)*

1. ***What are the project goals?*** *(Up to 6 points)* ***- Info***

Click or tap here to enter text.

1. ***List the output measures*** *(Up to 7 points)* ***(Add rows as needed) - Info***

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| **OUTPUT MEASURES** | **TARGET** |
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1. ***List the expected outcome measures****(Up to 7 points)* ***(Add rows as needed) - Info***

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| --- | --- |
| **OUTCOME MEASURES** | **TARGET** |
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1. ***Data Management*** *(Up to 10 points)****: What data will be collected, how, and by whom to determine if the project is achieving the established output and outcome measures throughout the grant period (Maximum 250 words)?*** - ***Info***

Click or tap here to enter text.

1. **Budget Estimate**

*(Up to 20 points)*

* 1. ***List other funding sources or proposed funding sources for this project (if any).***

Click or tap here to enter text.

* 1. ***Budget Estimate (Add rows as needed)***

*Indicate the different categories of expenses proposed in the project. Provide, in the* ***“Description” column****, an explanation of each expense associated with the category. Include in the* ***“Cost per Item” column*** *the amount of items and cost per unit, for example: 100 tickets X $5/ticket.* ***Expenses listed in the budget must be substantiated in the Sections I and II.***

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| --- | --- | --- | --- |
| **Category** | **Description** | **Cost Per Item** | **Total** |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
|  |  |  | $ |
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|  |  |  | $ |
|  |  |  | $ |
| **GRAND TOTAL:**  |  |  | **$** |

|  |  |
| --- | --- |
| **Application completed by:** |  |
| ***Print Name*** | ***Title*** |
| Click or tap here to enter text. | Click or tap here to enter text. |
| ***Signature*** | ***Date***  |
|  | Click or tap to enter a date. |