

UNITED STATES DEPARTMENT OF JUSTICE
Office of Justice Programs - Office for Victims of Crime
VICTIM ASSISTANCE FORMULA GRANT PROGRAM
VOCA – Sub-grantee Award Report (SAR)

FEDERAL AWARD NUMBER: This will be filled in by the Center for Crime Victim Services				
1. Subgrantee Organization/Tribal Name				
A. Organization Name:				
B. Street Address:				
C. City:	D. State:	E. Zip Code:		
2. Subgrantee Organization/Tribal Point of Contact (POC) For PMT Reporting				
A. POC First Name:		POC Last Name:		
B. POC Phone:			C. POC E-mail Address	
3. Subgrantee Organization Type				
A. Government Agencies Only: Which designation best describes your government agency? (select one response)				
<input type="checkbox"/> Corrections <input type="checkbox"/> Courts <input type="checkbox"/> Juvenile Justice <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Prosecutor <input type="checkbox"/> Other Government Agency				
B. Non-profit Organization Only: Which designation best describes your non-profit organization (check all that apply)				
<input type="checkbox"/> Child Abuse Service Organization (e.g., child advocacy center) <input type="checkbox"/> Coalition (e.g. state domestic violence or sexual assault coalition) <input type="checkbox"/> Domestic and Family Violence Organization <input type="checkbox"/> Faith-Based Organization <input type="checkbox"/> Organization provides domestic and family violence and sexual assault services <input type="checkbox"/> Organization by and/or for underserved victims of crime (e.g., drunk driving, homicide, elder abuse) <input type="checkbox"/> Sexual Assault Services Organization (e.g., rape crisis center) <input type="checkbox"/> Multi-Service Agency <input type="checkbox"/> Other				
C. Federally Recognized Tribal Governments, Agencies, and Organizations Only: Which designation best describes your tribal agency or organization? (select one response)				
<input type="checkbox"/> Child Abuse Service Organization (e.g., child advocacy center) <input type="checkbox"/> Court <input type="checkbox"/> Domestic and Family Violence Organization <input type="checkbox"/> Faith-based organization <input type="checkbox"/> Juvenile Justice <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Organization provides domestic and family violence and sexual assault services <input type="checkbox"/> Prosecutor				

- Sexual Assault Services Organization (e.g. rape crisis)
- Other justice-based agency
- Other agency that is NOT justice-based (e.g. human services, health, education)
- Organization by and/or for a specific traditionally underserved community
- Organization by and/or for underserved victims of crime (e.g., drunk driving, homicide, elder abuse)
- Other

D. Campus Organizations Only: Which designation best describes your campus organization? (select one response)

- Campus-based victim services
- Law Enforcement
- Physical or mental health service program
- Other (write-in)

4. OVC Crime Victim Assistance Award

Amount Awarded

A. Project Start Date

B. Project End Date

C. State-assigned award number-CCVS will fill in:

5. Purpose of the VOCA Sub award (check all that apply)

- Continue a VOCA-funded victim project funded in a previous year
- Expand or enhance an existing project not funded by VOCA in the previous year
- Start up a new victim services project
- Start up a new Native American victim services project
- Expand or enhance an existing Native American victim services project

6 . Priority and Underserved Requirements:

Subgrantees do not answer this question

A. Child Abuse <i>(includes services for child physical abuse/neglect and child sexual assault/abuse)</i>	This is determined by the state for all SARs. It will auto-populate all active SARs during the same federal fiscal year.
B. Domestic and Family Violence	
C. Adult Sexual Assault	
D. Underserved	
TOTAL	

Please briefly explain how you define underserved:

7. SERVICE AREA (County, State)

8. Sub award match (financial support from other sources)

A. Value of in-kind match

B. Cash match

C. Total match (auto calculated)

D. Did you receive a match waiver? Yes or No

VOCA grants, issued during the pandemic emergency to May 11, 2024 are subject to a mandatory match waiver, and do not require a match. All grants issued during this time check yes.

9. Use of VOCA and Match Funds (check all that apply)

A. Information & Referral

- Information about the criminal justice process
- Information about victim rights, how to obtain notifications, etc.
- Referral to other victim services programs
- Referral to other services, supports, and resources (includes legal, medical, faith-based organizations, address confidentiality programs, etc.)

B. Personal Advocacy/Accompaniment

- Victim advocacy/accompaniment to emergency medical care
- Victim advocacy/accompaniment to medical forensic exam
- Law enforcement interview advocacy/accompaniment
- Individual advocacy (assistance in applying for public benefits, return of personal property or effects)
- Performance of medical forensic exam or interview, or medical evidence collection
- Immigration assistance (e.g., special visas, continued presence application, and other immigration relief)
- Intervention with employer, creditor, landlord or academic institution
- Child and/or dependent care assistance (provided by agency)
- Transportation assistance (provided by agency)
- Interpreter services

C. Emotional Support or Safety Services

- Crisis intervention (in-person, includes safety planning, etc.)
- Hotline/crisis line counseling
- On-scene crisis response (e.g. community crisis response)
- Individual Counseling
 - Therapy (traditional, cultural, or alternative healing; art, writing or play therapy, etc.)
 - Support groups (facilitated or peer)
 - Emergency financial assistance (includes emergency loans, taxis, prophylactics and non-prophylactic meds, durable/medical equipment, etc.)

D. Shelter/Housing Services

- Emergency shelter or safe house
- Transitional housing
- Relocation assistance

E. Criminal/Civil Justice System Assistance

- Notification of criminal justice events (e.g., case status, arrest, court proceedings, case disposition, release etc.)
- Victim impact statement assistance
- Assistance with restitution (includes assistance in requesting and when collection efforts are not successful)
 - Civil legal attorney assistance in obtaining protection or restraining order
 - Civil legal attorney assistance with family law issues (e.g., custody, visitation, or support)
 - Immigration attorney assistance (e.g., special visas, continued presence application, and other immigration relief)
- Other Emergency justice-related assistance
- Immigration assistance (e.g. special visas, continued presence application, and other immigration relief)

- Prosecution interview advocacy/accompaniment (includes accompaniment with prosecuting attorney and with victim/witness)
- Law enforcement interview advocacy/accompaniment
- Criminal advocacy/accompaniment
- Other legal advice and/or counsel

F. ASSISTANCE IN FILING COMPENSATION CLAIMS

- Assistance with victim compensation application **(THIS IS REQUIRED)**

10. TYPES OF VICTIMIZATIONS

- Adult Physical Assault (includes Aggravated and Simple Assault)
- Adult Sexual Assault
- Adults Sexually Abused/Assaulted as Children
- Arson
- Bullying (Verbal, Cyber or Physical)
- Burglary
- Child Physical Abuse or Neglect
- Child Pornography
- Child Sexual Abuse/Assault
- Domestic and/or Family Violence
- DUI/DWI Incidents
- Elder Abuse or Neglect
- Hate Crimes
- Human Trafficking: Labor
- Human Trafficking: Sex
- Identity Theft/Fraud/Financial Crime
- Kidnapping (non-custodial)
- Kidnapping (custodial)
- Mass Violence (Domestic/International)
- Other Vehicular Victimization (e.g. Hit and Run)
- Robbery
- Stalking/Harassment
- Survivors of Homicide Victims
- Teen Dating Victimization
- Terrorism (Domestic/International)
- Other

If other please explain:

Click or tap here to enter text.

11. Budget and Staffing---This current fiscal year

A. Total Budget for all victimization programs/services for this agency:	
B. ANNUAL funding amounts allocated to the victimization program/services for the current fiscal year:	
State:	
Local:	
Other Federal:	
Other Non-Federal:	
C. Total paid staff for <u>all</u> sub grantees victimization program/services.	
D. Number of staff hours funded through this VOCA award (plus match) for subgrantee's victimization programs and/or services:	
E. Number of volunteer staff supporting the work of this VOCA award (plus match) for subgrantee's victimization programs and/or services (Count each volunteer once. Do not prorate based on FTE):	
F. Number of volunteer hours supporting the work of this VOCA award (plus match) for subgrantee's victimization programs and/or services:	