



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
www.samhsa.gov

December 19, 2008

Dear Drug Free Communities Grantee:

This letter is to provide you with important information and instructions to help you submit the appropriate materials for the continuation of your Drug Free Communities (DFC) grant.

Continuation Application must be submitted by March 2, 2009.

In order to continue grant support for FY2009, the Office of National Drug Control Policy (ONDCP) and Substance Abuse and Mental Health Services Administration (SAMHSA) require that you submit continuation documentation which includes a budget and work-plan for the next grant year (September 30, 2009 through September 29, 2010). Many of the standard forms you will encounter in this process are referred to as “application” materials. ONDCP and SAMHSA do not consider this a competitive grant application process. In other words, you are not competing against other applicants. However, continued funding is contingent upon:

1. demonstrating reasonable progress toward your coalition’s stated goals; and
2. demonstrating that you continue to meet the statutory eligibility requirements as outlined in the original RFA. (see attached Eligibility Certification Checklist)

It is our intention to use this process to gather required information and documents to continue your Federal grant support.

You may submit your 2009 continuation package through Grants.gov or regular mail. The 2009 Continuation forms can be obtained either at www.grants.gov or at www.samhsa.gov. To obtain the forms from the SAMHSA website, go to www.samhsa.gov then click on “grants” then click on “applying for a SAMHSA grant” then click on “Continuation Grants”. (NOTE: the continuation letter and supplemental instructions available on the SAMHSA website are for other SAMHSA programs – not the DFC program.)

ONDCP and SAMHSA are dedicated to ensuring you have a successful application package. If you have any questions about the information in this letter regarding the instructions for submission of materials for the continuation of Drug Free Communities grant support, please contact your Grants Management Specialists or Project Officer.

You can find your Grants Management Specialists and Project Officer listed on the last page of your Notice of Award (NoA) or at the ONDCP website, www.ondcp.gov/dfc/ under the box Grantees, click on “Important Contacts” then locate by State.

CONTINUATION PROCESS

Complete Form PHS-5161-1. Please prepare your continuation paperwork carefully in accordance with the **Supplementary Instructions** (attached). You must complete and submit the following:

1. SF-424 (Version 02) Application for federal Assistance – (face page)
2. SF-424A Budget Information-Non-Construction Programs
3. Detailed Budget narrative justification for each budget category – (See Supplementary Instructions)
4. In addition to the **required 12 month detailed budget and narrative justification** for the continuation period, submit an explanation/justification including supporting documentation, if necessary, for any changes from the current budget period.
5. Grantee must budget to send two people to a (2) day national training in Washington, DC. ONDCP will provide guidelines on the positions and/or participants who should attend. This requirement is in addition to any other training(s) or conferences that applicants may choose to include in their budgets (State Conferences, Federal Agency Sponsored Conferences or the National Leadership Forum, etc).

To calculate the costs associated with this requirement, estimate the following expenses:

- The cost of airfare to and from a national training in Washington, DC, or the cost of ground transportation if you are located within 500 miles of DC.
 - Lodging, per diem, and local transportation costs for participation in a 2-day training in Washington, DC.
6. Project/Program narrative outlining the progress and accomplishments resulting from the past year of support. – (See Supplementary Instructions)
 7. A work-plan for the grant year (September 30, 2009 through September 29, 2010).
 8. Resumes and job descriptions for any key staff changes. Please list date(s) changes will go into effect.
 9. Grantees currently in year 2 or 6 of funding (submitting a continuation application for year 3 or 7) need to submit a separate sustainability plan with this application. (See Supplementary Instructions)
 10. SF-424B Assurances-Non-Construction Programs and Certifications
 11. PHS-5161-1 Checklist
 12. SF-LLL – Disclosure of Lobbying Activities
 13. Eligibility Certification Checklist (See attached).
 14. Disclosure of Drug-Free Communities Coalition Information

SUBMITTING YOUR APPLICATION

You may submit your 2009 continuation package through grants.gov or regular mail.

Electronic Submission through Grants.Gov

At least 10 days before you submit an application through grants.gov you may need to **complete and/or renew** your organization's registration with that system. Steps for completing the registration can be found at www.grants.gov under "For Applicants – Get Registered".

To submit an application follow the instruction under www.grants.gov "For Applicants – Apply for Grants". You may access the application with either the CFDA no.: 93.276 or the funding opportunity number: SAMHSACONT09-03.

It is strongly recommended that you submit your grant application using Microsoft Office products (e.g., Microsoft Word, Microsoft Excel, etc.). If you do not have access to Microsoft Office products, you may submit a PDF file. Directions for creating PDF files can be found on the Grants.gov Web site. Use of file formats other than Microsoft Office or PDF may result in your file being unreadable by our staff.

SAMHSA requires original signatures on certain application documents. Therefore, you must submit a signed paper original of the SF-424 (Version 02) Application for federal Assistance – (face page) and a hard copy of any other required documentation that cannot be submitted electronically. You must reference the Grants.gov tracking number from your application, on these documents with original signatures. The documents must be received, at the SAMHSA Grants Management Office, 1 Choke Cherry Rd. – Room 7-1091, Rockville, MD 20857 (USPS-standard delivery zip code) or 20850 (zip code for all overnight deliveries), within five (5) business days of your electronic submission.

After you electronically submit your application, you will receive an automatic acknowledgement from Grants.gov that contains a Grants.gov tracking number. It is important that you retain this number.

For assistance with the grants.gov contact: Email: support@grants.gov

Telephone: 1-800-518-4726. The Grants.gov Contact Center hours of operation are Monday-Friday, 7 a.m. to 9 p.m., Eastern Standard Time (except legal holidays).

To submit a paper application through a common carrier you need to:

1. Obtain the forms from the SAMHSA website - www.samhsa.gov then click on "grants" then click on "applying for a SAMHSA grant" then click on "Continuation Grants"
2. Complete the forms and other documents. Include your grant number
3. Send the original and two copies to this mailing address:

Division of Grants Management
1 Choke Cherry Rd. – Room 7-1091
Rockville, MD 20857 (USPS – standard delivery) or 20850 (all overnight deliveries)

If you require a phone number for delivery, you may use (240) 276-1400.

Please do not email applications to your Grants Management Specialist or Project Officer.

For questions about the continuation application please contact the Grants Management Specialist listed on your Notice of Award Letter or on the ONDCP website.

NOTE: For all communications with SAMHSA staff either by email, letter, fax or phone, please use your grant number and organization name.

Continuation applications must be submitted by March 2, 2009.

In addition, all carryover requests of an unobligated balance of funds for the current budget period must be submitted no later than March 2, 2009. Any requests for carryover after this date will be considered in the subsequent budget period.

For instructions on Postward Administrative Requirements please refer to the SAMHSA website www.samhsa.gov then click on “grants” then click on “grants management”. **If you have any questions please contact your Grants Management Specialist.**

Sincerely yours,

Kathleen Sample
Grants Management Officer
Division of Grant Management
Office of Program Services

SUPPLEMENTARY INSTRUCTIONS FOR COMPLETING PHS-5161-1

Application for Drug Free Communities (DFC) Non-Competing Continuation Grant

General information and instructions for completing and submitting a non-competing continuation application may be found in the Grant Application PHS-5161-1. The following information is specifically directed at Substance Abuse and mental Health Services Administration (SAMHSA) programs and is intended to supplement, clarify, or, where necessary, replace those instructions found within application form (PHS-5161-1).

USEFUL INFORMATION FOR COMPLETING PHS-5161-1

Complete all sections applicable to your grant.

SF-424 (Version 02) Application for Federal Assistance – face page

Item 5b – Federal Award Identifier: For a continuation of an existing award, enter the previously assigned Federal award identifier number – on Page 1 “Grant Number” on the Notice of Award (NoA).

If there is a change of the Grantee/Fiscal Agent you must include a cover letter explaining the reason, the current grantee must submit a relinquishment letter and must contact their Grants Management Specialist for instructions. This action requires prior approval by the Grants Management Officer, SAMHSA.

Item 8f - Name and contact information of person to be contacted on matters involving this application: enter the name and telephone number of the current Program Director.

Item 11 - Catalog of Federal Domestic Assistance Number: 93.276

Item 12 - Funding Opportunity Number: SAMHSACONT09-03

Item 18 - Estimated Funding: Enter the amount of Federal funds (TOTAL COSTS: Direct and Indirect Costs) being requested from SAMHSA for this continuation grant application. This total should correspond with the figures on the SF-424A Budget Information-Non-Construction Programs **and on your current Notice of Award**, Page 2 “Summary Totals for all Years” the maximum allowable amount of Federal dollars is shown here (contingent on availability of funds) for which you may apply the coming grant year.

Program Income is gross income – earned by a recipient, sub-recipient, or a contractor under a grant – directly generated by the grant-supported activity or earned as a result of the award. Program income includes, but is not limited to, income from fees for services performed; charges for the use or rental of real or property; equipment, or supplies acquired under the grant; the sale of

commodities or items fabricated under an award; charges for research resources; license fees; royalties on patents and copyrights.

Item 19 - Executive Order 12372: Refer to listing of SPOC. If the State is not listed, it does not participate in the requirements. (www.samhsa.gov/grants/continuation.aspx)

Item 21 – Assurances and Certificates: Check “I agree” and have the Grantee/Fiscal Agent Authorizing Official sign – a copy of the certifications and assurances, for your records, is found at www.samhsa.gov/grants/apply.aspx.

Item 21a – Authorized Representative: By signing the Authorizing Official is certifying that the
SF-424B Assurances-Non-Construction Programs and Certifications are true.

SF-424A Budget Information-Non-Construction Programs

Section B - Budget Categories

Line 6 Column (3) Enter the Federal dollars being requested for each object class category. The total of Column (3) should equal the amount reflected in Section A Column (e) – this amount should be no more than what was approved for future funding years (See NoA - Page 2 “Summary Totals for all Years”)

Line 6 Column (4) Enter the total non-Federal funds (match) for each object class category. The total of Column (4) should equal the amount reflected in Section A Column (f). Years 7-8 must demonstrate 125% of Federal request. Years 9-10 must demonstrate 150% of Federal request.

If indirect costs are requested, enter the amount on line 6j, Column (3). To substantiate the request, a copy of the applicant organization's most current negotiated indirect cost rate agreement established must be submitted with the application. Failure to submit a copy of this established rate may result in delay of the award.

INSTRUCTIONS FOR COMPLETING THE DETAILED BUDGET NARRATIVE JUSTIFICATION

In this section, applicants must provide a one-year budget and budget justification based on the structure of the sample budget from the SAMHSA website or original RFA. Please include (as part of this budget) a narrative justification for each budget category. The budget must include a description of matching resources and other support that the coalition expects to receive. There is no page limit for the budget and budget justification.

Obtain the forms from the SAMHSA website - www.samhsa.gov then click on “grants” then click on “applying for a SAMHSA grant” then click on “Continuation Grants” scroll down to Sample Budgets. Use the Sample Budget with Matching Funds (MS Word or PDF Format).

INSTRUCTIONS FOR COMPLETING THE PROGRAM NARRATIVE

These instructions for completing the program narrative portion of a noncompetitive continuation application replace those found in the PHS-5161-1. NOTE: A complete resubmission of the material contained in the initially approved application is not required. The program narrative for a noncompetitive continuation application consists of:

The SAMHSA Program staff will utilize the information submitted via the semi-annual COMET reports and other required reports (sustainability, core measure collection, etc.) to determine progress toward meeting the grant goals and objectives. Grantees do not need to submit a separate narrative describing their progress as part of this submission package.

Grantees who are renewing their funding for Year 3 or Year 7 of their project must submit a sustainability plan as part of the application package. The seven elements required for this plan are described in the following section.

Work-plan for the Coming Grant Year (September 30, 2009 through September 29, 2010)

This section serves as the one-year Action Plan (Up to 6 pages) that puts into action the components necessary to carry out effective community change strategies (seven strategies for community change).

In this section applicants must describe the following:

Provide an Action Plan for the continuation year of the DFC grant. Include the following for each of the two DFC Program identified goals:

- brief description of what specific strategies and activities the coalition will undertake.
- what outcome(s) each activity will create,
- briefly describe how the coalition will measure progress toward achieving the outcome related to each activity and how that ties into the identified targeted substance abuse and related consequences or problems identified in the grant application, who in your coalition and community is responsible for each activity,
- what resources you will need to achieve the desired outcome for each activity.

Strategy	Activity	Outcome	Responsibility	Resources

Sustainability Plan

Grantees currently in the year 2 or 6 of funding (submitting a continuation application for year 3 or 7) need to submit a separate sustainability plan with this application. Please develop the sustainability plan by addressing the seven areas listed below. The main purpose of the sustainability plan should be to help the community sustain the outcomes or community changes that are reducing substance abuse in the community.

1. Connect the sustainability plan to the coalition's overall strategic plan.
2. Identify what outcomes and strategies need to be sustained to keep substance abuse rates from increasing or to continue driving them down.
3. Identify what resources will be required in the future to keep these strategies or changes in place.
4. Create case statements that describe the community need, the impact of the coalition's work and the consequences of the coalition's work not continuing.
5. Determine funding strategies that will support the work of the coalition in the future, especially after Federal funding is no longer available.
6. Identify potential partners for each identified funding strategy.
7. Create an action plan to contact and present the sustainability plan to potential partners.

Further information on sustainability may be found on the National Coalition Institute's Website at the following address: www.coalitioninstitute.org

Sustainability is listed under Strategic Prevention Framework in the yellow box on the left side of the Coalition Institute home page.

PHS-5161-1 Checklist

Type of Application: Check "Non-competing continuation"

Part A - Item 4: List the date the HHS 690 was submitted

Part B - Item 1: Public Health System Impact Statement for the program should have been completed and distributed with the first year of the award. If changes were requested and approved, then resubmit to appropriate State agency.

Part C - The "Business Official to be notified..." should be either the authorizing official identified in Item 21a on SF-424 or the designated business official of the applicant organization.

The Program Director/Project Director is the individual "designated to direct the proposed project or program" and **must be** the same individual identified on SF-424 (Version 02) Application for federal Assistance – (face page) – Item 8f .

Part D: If non-profit status was previously filed complete bottom portion. If this is a new non-profit designation submit at least one of the required documents with the application.

SF-LLL – Disclosure of Lobbying Activities

If your organization conducts lobbying activities complete all parts of the form and return with the application.

If you organization doesn't conduct lobbying activities indicate "Not Applicable" on the form and return with the application.

ELIGIBILITY CERTIFICATION CHECKLIST

Complete the attached checklist.

Disclosure of Drug-Free Communities Coalition Information

Complete the attached disclosure in order to verify which year the grantee and coalition have been operating under this grant since the same coalition may have 10 years of funding according to the law.

Drug Free Communities Support Program (DFC) Continuation Application

Eligibility Certification Checklist

In accordance with the criteria set forth in the Drug Free Communities Act, 1997 (Public Law 105-20) and subsequent reauthorizations, coalitions funded through the DFC Program must demonstrate that the coalition continues to meet the statutory eligibility requirements annually as part of the grant renewal or continuation process.

Coalitions who do not continue to meet the statutory eligibility requirements may be placed on a High Risk restriction and may be required to submit supporting documentation regarding the eligibility requirements. Failure to meet eligibility requirements may result in loss of continued grant funding (for more information visit the program's website at <http://www.ondcp.gov/dfc/cer.html> and http://www.ondcp.gov/dfc/appeals_process.html .

The coalition is required to complete this Eligibility Certification Checklist as part of the annual grant renewal process. The Authorized Representative for the coalition should initial next to each numbered item below and check whether or not the coalition is still in compliance with each eligibility requirement. If the Coalition is not in compliance with a given element, an explanation should be documented as to why the coalition is not currently in compliance and what the coalition plans to do to achieve the requirement within the next 90 days.

Initials	Yes	No	
_____	_____	_____	1. The coalition has submitted a continuation (renewal) grant application.
_____	_____	_____	2. The coalition has one or more representatives of the 12 required sectors of a community as outlined in the DFC Act.
_____	_____	_____	3. The coalition has been in existence for at least 6 months, with substantial involvement from volunteer leaders or members.
_____	_____	_____	4. The coalition has as its principal mission the reduction of substance abuse in a comprehensive and long-term manner, with a primary focus on youth in the community and strategies to achieve the mission.
_____	_____	_____	5. The coalition can be sustained as an ongoing concern with non-Federal financial support.
_____	_____	_____	6. The coalition has established a system to measure and report the DFC program's four required measures [(1) age of onset of any drug (including alcohol, marijuana and tobacco); (2) frequency of drug use in the past 30 days (including alcohol, marijuana and tobacco); (3) perception of risk or harm; and (4) perception of disapproval of use by adults (including alcohol, marijuana and tobacco)].

If an item above is checked "NO", an explanation should be provided in the space below to document what the reason is that the coalition does not currently meet this requirement and what corrective action will the coalition undertake to become fully compliant within the next 90 days.

I hereby acknowledge that the above statements are true and can be verified with supporting documentation upon request.

Authorized Representative

Date

Disclosure of Drug-Free Communities Coalition Information

1. Identify the names of the grantee/fiscal agent and coalition on your current application:

NAME OF FISCAL AGENT: _____

NAME OF COALITION: _____

TO HELP US ACCURATELY DETERMINE IF AND WHEN YOUR COALITION HAS PREVIOUSLY RECEIVED DFC FUNDING, PLEASE ANSWER THE FOLLOWING:

2. Indicate the status of your coalition:

- DFC COALITION FORMERLY FUNDED
- DFC COALITION CURRENTLY FUNDED
- COALITION APPLYING FOR FIRST TIME DFC FUNDING

3. For all prior DFC awards (First time applicants do not complete this section), identify the name of the federal agency that funded the coalition's prior grant (i.e., SAMHSA/CSAP, DOJ/OJJDP), year(s) of funding (enter ranges where applicable), grant number, fiscal agent name as it appeared on the Notice of Award (When using acronyms please also include the full name).

<u>FEDERAL AGENCY</u>	<u>YEAR(S) OF DFC FUNDING</u>	<u>DFC GRANT #</u>	<u>FISCAL AGENT NAME</u>
EG: SAMHSA	2004 - 2007	SP012345	CONA - Coalition of North America
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. If your coalition had a break in funding, indicate each year you did not receive funding from the Drug-Free Communities program.

No DFC FUNDING: _____