


**CAPCOG Criminal Justice PY2027 Project Summary Sheet- WORKSHEET ONLY**

**IMPORTANT – PLEASE READ CAREFULLY**

** DO NOT EMAIL THIS DOCUMENT TO CAPCOG.**

** CAPCOG WILL NOT ACCEPT SUBMISSIONS BY EMAIL OR IN WORD FORMAT.**

This document is provided solely as a worksheet to assist applicants in preparing their responses for the online Project Summary Sheet (PSS). The online PSS form is interactive and will display only the questions applicable to your project. This worksheet includes all possible questions in the online form and may include some that will not be displayed for you when you are completing the form.

 Only PSS submissions completed through the online form linked will be accepted and receive points for submission:

<https://forms.zohopublic.com/csimon/form/CAPCOGCriminalJusticePY2027ProjectSummarySheet1/formperma/FwCZpVFlV4TUlwK7ilf4NNSW3VhyivP-Gm4BxC6OUEw>

1. Organization Name:
2. Project Title:
3. eGrants Application Identification Number:
4. What fund source are you applying for?
  - General Victim Assistance Grant Program (VOCA)*
  - Violence Against Women Justice and Training Program (VAWA)*
  - Juvenile Justice Program (JJ)*
  - Youth Diversion (formally known as Truancy Prevention Program) (YD)*
  - Criminal Justice Assistance Program (JAG)*
5. Will your agency submit multiple applications in a single fund source?
  - Yes
  - No
6. Please indicate your funding priority for this project
  - Primary Preference: (This project is the top choice to receive funding)
  - Secondary Preference: (This project is the second choice to receive funding)
  - Tertiary Preference: (This project is the third choice to receive funding)

7. Please briefly explain the rationale behind the ranking of your projects (primary, secondary, tertiary)  
*Include the factors that influenced your decision (300 Word Max). Please refer to the CAPCOG CJAC Policy Statement for more information on project preference.*

8. Please provide a brief summary of your project. *Be sure to include all relevant information you would like the scoring committee to consider. (Max 750 Words)*

9. Is this a continuation project?

- Yes
- No

10. If this is a continuation project what year is the project in?

11. If this is a continuation project, are you on track to meet your current impact measures?  
 Please provide details supporting the progress of each measure

12. What percentage of the agency's budget does this grant cover?

13. Does the project have other components or is part of another project that the scoring committee would want to know about?

14. Please provide a breakdown of where your clientele is located (by county) in relation to this project.

*This should include clients from the past 12 months, including any current clients.*

	<i>Number of Clients Served Per County</i>
Bastrop	
Blanco	
Burnet	
Caldwell	
Fayette County	
Hays County	
Lee County	
Llano County	

Travis County	
Williamson County	
Outside of CAPCOG region	

15. If your project extends beyond the CAPCOG Region, how will you ensure that the funds are dedicated solely to supporting efforts within our region?

16. What is the demographic breakdown of your clientele served or proposed to be served? *[White/African American / Hispanic /Asian/etc.]*

17. If your application budget contains indirect costs, please list the amount of indirect cost below.

18. What long-term funding plans does your agency have in connection with this application?

19. Please identify the sources and amounts of funds allocated for the proposed project for the current fiscal year  
*For example: This project will be funded 50% by Health and Human Services for \$5,000 and 50% by the Office of the Governor for \$5,000.*

20. What would the impact of a 10% reduction in funding be on this project?

21. Agency Email:  
*Please indicate the email address of the individual submitting the Project Summary Sheet, this individual will receive an email confirmation upon submission.*