

**Checklist To Describe Victim Services Project Activity**  
 (May be submitted in lieu of a project narrative. If you have any questions about how to use this form, please contact [OVC.TribalSetAside@ojp.usdoj.gov](mailto:OVC.TribalSetAside@ojp.usdoj.gov).)

<p><b>Name of the tribe applying (if a consortia, the names of all tribes included in the consortia). If applicant is a designee, provide the name of each tribe on whose behalf the designee has been authorized to submit an application for funding.</b></p>	
<p><b>How will this project improve services to victims in your community?</b></p>	
<p><b>Is this a new project?</b></p>	
<p><b>Is this a continuation of an ongoing project?</b></p>	
<p><b>What are the objectives for this project and how will you know if they are being achieved?</b></p>	

How will performance measurement data be collected?	
What data will be collected to show that you are meeting the goals and objectives of this award?	
How will progress be measured?	
Who will be responsible for tracking/collecting performance measurement data for this project?	

What victim services will be provided?			
<i>All costs associated with project-funded services must be reasonable in context and necessary for addressing the consequences of crime victimization. Project-funded services should include services that are not covered by other sources, such as personal health insurance, state health programs, state victim compensation programs, etc. Such services may include, but are not limited to—</i>	YES, WILL BE PROVIDED	NO, WILL NOT BE PROVIDED	IS THIS A <b>NEW</b> SERVICE TO BE PROVIDED?  (YES/NO)
Assistance with filing for Crime Victim Compensation			
Victim advocacy and case management including assessment of client needs, development of individualized service plans, assessment of eligibility for other public or community-based programs, assistance in accessing publicly funded programs, safety planning conducted at intake or at the news of a new threat or concern, assistance with crime victim compensation claims when possible, information and referrals, documentation of services provided, and routine followup to ensure that the victim's needs are being addressed across multiple systems			
Childcare costs for the victim's minor dependent(s)			
Client intake interviews and eligibility screening or assessment, to determine eligibility for programs and services			
Accompaniment to court or other appointments related to victim service/victimization			
Culturally appropriate services for victims			
Emergency assistance for victims, such as, clothing, food, personal hygiene products, household goods, etc.			

Crisis intervention or 24-hour response for crime victims			
Literacy education, job training, and/or education/GED assistance; employment readiness and assistance			
Interpreter/translator services			
Legal services (e.g., screening and assessment to determine the type of legal assistance needed; explanation of legal rights; and legal representation including assistance in obtaining restitution, enforcing victims' rights, family law cases, and other civil matters directly related to the crime victimization)			
Medical and dental care (e.g., referrals or making appointments with medical or dental providers on behalf of a client); accompanying a client to a medical or dental appointment; paying for prescriptions, vision, medical, or dental care that is not otherwise covered by public or private health insurance or (upon reasonable inquiry) some other source			
Forensic medical exams for victims of domestic violence and sexual assault			
Mental health counseling for individual adults and children, as well as families, including emergency mental health assessments; group therapy, including the self-help groups; and outpatient psychiatric care and medication management, as long as the costs are not otherwise covered by public or private health insurance, or (upon reasonable inquiry) some other source of funding			

<p>Shelter and housing to include emergency shelter, including crisis stays at hotels/motels, establishing and operating safe houses, transitional housing programs, and group and independent living options</p>			
<p>Substance abuse evaluation and treatment for crime victims, including inpatient and outpatient treatment programs, and support for self-help groups</p>			
<p>Transportation assistance for victims of crime, so that they can participate in program activities, meet with law enforcement or prosecution personnel about a criminal investigation/prosecution, attend court hearings, and access health care, job training/education programs, social services, or other complementary resources necessary to address issues directly related to their victimization</p>			
<p>Other services (describe)</p>			

<b>What kinds of victimization will be addressed?</b>	Identify the specific forms of victimization that the project will address. The table below includes some, but not all, of the types of crime victimization that an applicant may use the funds to address.		
	YES		NO
Arson			
Assault			
Burglary			
Child abuse (physical and/or sexual)			
Dating violence			
Domestic violence			
Elder abuse			
Fraud			
Homicide			
Identity theft			
Missing persons/kidnapping			
Labor trafficking			
Rape/sexual assault			
Robbery			
Sex trafficking			
Stalking			
Other crimes (describe)			
<b>What other project activities will be undertaken?</b>	YES, WILL BE PROVIDED	NO, WILL NOT BE PROVIDED	IS THIS A <b>NEW</b> ACTIVITY? (YES/NO)
Community needs assessment			
Development of policies and procedures			
Training for community partners			
Professional development for project staff			
Outreach and public awareness activities			

Other	
<b>Who will be served?</b>	
Estimated number of victims to be served	
Basis for estimating number of victims to be served	
Geographic area to be served (for example, described by county, ZIP code, reservation, village, region)	
Age of victims to be served (under 18, adults, both under 18 and adults)	

<p><b>What is the applicant's capacity to implement these activities?</b></p>	
<p>Has the applicant provided these services before? When, how, to whom?</p>	
<p>Are current OVC funds used to support this project (e.g., FY 2018 or 2019 Tribal Set-Aside or the DOJ Coordinated Tribal Assistance Solicitation grant and/or an FY 2020 Tribal Victim Services Set-Aside Formula grant)?</p>	



<p>Are federal funds from other sources being used to support this project?</p>	
<p>Does the applicant have current, written policies and procedures in place to guide these activities?</p>	
<p><b>What is the staffing plan for this project?</b></p>	
<p>Who will lead the project?</p>	
<p>What are their qualifications for serving as a project director?</p>	

<p>Who will staff the project? (List by position/title and specify whether or not the position will be full time or part time.)</p>	
<p>What are their qualifications (relevant education, training, or previous work experience)?</p>	
<p>Will any of the staff positions be new hires? If so, which positions?</p>	
<p>What will the knowledge, skill, education, and experience requirements be for new staff positions?</p>	

<p><b>Are there partner organizations that will assist with delivering activities under this project?</b></p>	
<p>What other organizations will play a role in developing and implementing this project?</p>	
<p>What will their roles be?</p>	
<p>Who will be the representatives for each partner organization? (Provide names, organizations, and positions/titles.)</p>	

<p>What role will each representative play in developing and implementing the project?</p>	
<p><b>What is the timeline for this project?</b></p>	
<p>How many months will the project be? (up to 60 months)</p>	
<p>What are the significant project milestones?</p>	

<p>When will these milestones be accomplished?</p>	
<p>Who will be responsible for achieving each milestone? (Provide names and positions/titles.)</p>	