# Department of Veterans Affairs (VA) Veterans Justice Program

# APPLICATION FOR LEGAL SERVICES FOR HOMELESS VETERANS AND VETERANS AT-RISK FOR HOMELESSNESS (LSV-H) GRANT

Application Type:	Legal Services for Veterans
Organization Legal Name:	
Status:	Draft
Primary Contact:	
FAIN/Grant ID:	TEST-789-LSV-318-24
Application Deadlin	e: Friday, February 23, 2024
Application	
Applicant Eligibility	
Entity Type	
Organization Financial Sup	pport
Application Criteria and Re	equirements
Applicant agrees to meet	the applicable criteria and requirements.
○ Yes ○ No	

Section I: Administrative Information

#### A. APPLICATION INFORMATION

**Organization Legal Name** (as identified in your Articles of Incorporation): VJP TEST

Other Names under Which Organization Does Business:

123 VJP TEST

**Organization Address:** 

112 Ocean Avenue

Amityville, NY 11701-1122

**Organization Primary Contact Person Name and Title:** 

**Telephone number for Contact Person** (where the person can be reached during business hours):

E-mail for Contact Person:

Employer Identification Number (EIN) that Corresponds to the Applicant's IRS Ruling Certifying Tax-Exempt Status under the IRS Code of 1986

(Note: EIN will be used to determine whether applicant is delinquent or in default on any Federal debt, in accordance with 31 U.S.C. 3701, et seq. and 5 U.S.C. 552a at note): 123456789

**Unique Entity Identifier (UEI):** 

00000000000

**SAM Expiration Date:** 

2023-12-01

B. LEGAL SERVICES PROPOSED

Amount of LSV-H grant funds requested

Types of allowable legal services that will be provided
Check all that apply.
Housing Law
☐ Family Law
☐ Income Support
☐ Discharge or Dismissal Upgrade
☐ Criminal Defense (see 38 CFR 79.20(d))
☐ Protective Orders r/t DV or IPV
☐ Consumer Law
☐ Employment Law
☐ Access to Health Care
□ Tax Law
Projected number of eligible Veterans to be served per grant cycle
*Does your organization have a demonstrated focus on providing legal services to women Veterans?
○ Yes ○ No
C. GEOGRAPHIC REGION SERVED
1. State(s) to be served
Coloct all that apply
Select all that apply.
Counties to be served
VISN(s) to be served
Salact all the Voterans Integrated Service Network (VISN) Number that apply in which the proposed
Select all the Veterans Integrated Service Network (VISN) Number, that apply, in which the proposed program will operate.  ( <a href="https://www.va.gov/HEALTH/visns.asp">https://www.va.gov/HEALTH/visns.asp</a> )

# Check which of the following geographic regions applies to the primary area or community in which the proposed program will operate. D. COMPLIANCE WITH THRESHOLD REQUIREMENTS (38 CFR 79.30) 1. Eligible Activities Applicant proposes to use LSV-H funding for eligible activities only (see 38 CFR 79.20 for list of eligible activities) 2. Eligible Participants 3. Compliance with Interim Final Rule 4. Outstanding Obligations Yes O No 5. Audits O No Yes 6. Default Is the applicant in default by failing to meet the requirements for any previous federal assistance Yes O No

Specific types of geographic regions to be served

Section II: Background, Qualifications, Experience & Past Performance of

## Applicant and any identified Subcontractors

The information requested below should be typed into the boxes following each question in the application form. Limit your responses to the space provided. In scoring the application, VA will award up to 30 points based on the applicant's responses to questions contained in this section.

#### A. BACKGROUND AND ORGANIZATIONAL HISTORY

- \*1. Describe your organization's background and history providing legal services to Veterans and/or populations who are homeless, at risk of homelessness, or very low income. Include background and history for any subcontractors. Describe your organizational reporting structure and responsibilities of key roles. Describe your history complying with agreements and meeting financial obligations.
- \*2. Describe your organization's existing and prospective staff's, including any identified subcontractor, experience working with homeless or very low income populations. Describe staff's experience administering LSV-H Grant Program. Include the experience of any identified subcontractor.
- \*3. Describe your organization's qualifications and past performance, including any identified subcontractors, providing legal services to individuals who are homeless, at risk for homelessness, or who have very low income as defined in this part. Describe your organization's, and any identified subcontractors, plan to hire staff who are qualified to administer legal services, and as applicable are in good standing as a member of a state bar.
- \*4. Describe your staff, and any identified subcontractors, experience working with Veterans, including women Veterans. Describe your staff, and any identified subcontractors, experience providing legal services to Veterans, including women Veterans. Provide resumes or position descriptions of key staff in Exhibit II section below.

# Section III: Program Concept & Legal Services Plan

The information requested below should be typed into the boxes following each question in the application form. Limit your responses to the space provided. In scoring the application, VA will award up to 30 points based on the applicant's responses to questions contained in this section.

Applicants should reference the requirements set forth in the NOFO in preparing these responses.

\*1. Describe the unmet legal needs unique to eligible Veterans in the area or community where the program will be based.

- \*2. Describe your organization's outreach and screening plan to include how legal services will be provided to eligible Veterans, including women Veterans and how your organization will use at least 10% of the grant award to serve women Veterans. The plan should also include how your organization plans to process and receive referrals as well as the plans to assess and accommodate the needs of incoming eligible Veterans.
- \*3. Describe your program concept, size, scope and staffing plan and how your program is designed to meet the legal needs of eligible Veterans. Program design should detail the specific types of allowable legal services you plan to provide.

### Display: Types of allowable legal services chosen above

If you need to make changes to this list, please go back to this question above and edit accordingly.

- \*4. Describe your program implementation timeline, including how legal services will be delivered as quickly as possible within a specified timeline and if your organization's hiring plan is in place or if existing staff are in place to meet the timeline.
- \*5. How will your organization coordinate outreach services with local VA facilities.

# Section IV: Quality Assurance and Evaluation Plan

The information requested below should be typed into the boxes following each question in the application form. Limit your responses to the space provided.

In scoring the application, VA will award up to 15 points based on the applicant's responses to questions contained in this section.

\*1. The goal of LSV-H is to address the legal needs that contribute to housing instability of homeless or atrisk Veterans. Programs funded need to have measurable goals that reflect the applicant's ability to address the legal needs of eligible Veterans. Describe your organization's evaluation plan, including goals, and what data your organization will collect to monitor if those goals are met.

- \*2. Describe your organization's monitoring structure, including monitoring of subcontractors, for compliance with laws, regulations and guidelines. Describe your organization's financial monitoring to ensure proper use of LSV-H grant funds. Describe your organization's plan to ensure that any staff, and subcontractors, are trained and comply with requirements of 38 C.F.R. part 79, staff training plan. What processes will be put in place to remediate any non-compliant aspects of the grant program.
- \*3. Describe how your organization's management team has the capability and a system in place to provide the VA with timely and accurate reports at the frequency set by VA.

# Section V: Financial Capability and Plan

The information requested below should be typed into the boxes following each question in the application form. Limit your responses to the space provided. Exhibit I below must also be provided in the Microsoft Excel template. In scoring the application, VA will award up to 15 points based on the applicant's responses to questions contained in this section.

\*1. Describe financial controls in place to ensure that program funds are used appropriately and program is cost effective. Using the downloadable budget template below, provide a realistic plan for obtaining all funding required to operate the program and detailed one-year program budget that is itemized on a quarterly basis.

### **Download Microsoft Excel Budget template**

\*2. Specify all sources of funds to be used to operate the proposed program, including any identified subcontractors. Identify each source in a separate line item and the status of the funding, whether the funding is requested, committed, or received.

## Section VI: Area or Community Linkages and Relations

The information requested below should be typed into the boxes following each question in the application form. Limit your responses to the space provided.

In scoring the application, VA will award up to 10 points based on the applicant's responses to questions contained in this section.

- \*1. Describe your organization's plan for developing or having existing linkages or past working relationships with Federal (including VA), state, local and tribal governments, and private entities that will assist in the delivery of LSV-H legal services and non-legal supportive services to Veterans. Reference specific entity names. (Optional: attach memorandums of understanding, letters of coordination or other evidence of relevant, formal agreements under Exhibit III section below).
- \*2. Describe your organization's local presence and integration of linkages to coordinate legal services in the community or communities where your organization plans to deliver services.

# Section VII: Applicant Certifications and Assurances

The following items require a single certification on the following page by an authorized representative of the applicant requesting a legal services grant.

The list below should be included in the application packet with responses attached and numbered to correspond to the relevant item. VA may require that applicants provide documentation of these certifications.

#### Compliance

1. Applicant assures that the applicant and any subcontractors will comply with all requirements of 38 CFR Part 79. If the applicant intends to request waivers to any requirements included in the preceding citation, please explain.

## **Accuracy of Application Information**

2. All information submitted with this application is accurate, and does not contain any false, fictitious, or fraudulent statement or entry.

## Non-Delinquency

3. The applicant further certifies that the applicant is not currently in default or delinquent on any debtor loans provided or guaranteed by the federal government.

#### Debarment

- 4. The applicant further certifies that the applicant has not been in the preceding three years:
- a) debarred, suspended or declared ineligible from participating in any federal program;
- b) formally proposed for debarment, with a final determination still pending;
- c) voluntarily excluded from participation in a federal transaction; or
- d) indicted, convicted, or had a civil judgment rendered against it for any of the offenses listed in the regulations governing debarment and suspension (Government wide Nonprocurement Debarment and Suspension Regulations: 49 CFR Part 29).

### **Reports and Record Retention**

5. If this legal services grant is awarded, the applicant assures that any and all reports required by VA will be made available in such form and contain such information as VA may require. Applicant further assures that upon demand, VA has access to the records upon which such information is based.

#### **Fiscal Control**

6. If this legal services grant is awarded, the applicant assures that it will establish and maintain such procedures for fiscal control and fund accounting as may be necessary to ensure proper disbursement and accounting with respect to the legal services grant.

### **Civil Rights**

7. Applicant certifies that this program will comply with all provisions of Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.). If the applicant does not certify this, the applicant has provided information in Exhibit XI explaining any exceptions to this certification.

#### Lobbying

- 8. The undersigned certifies, to the best of their knowledge and belief, that:
- a) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.

\*b) If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit 15 Standard Forms LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

\*c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31 U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

### **Applicant Past Year Experience**

- 9. Identify Yes or No and explain in reasonable detail each instance within the past 10 years in which the applicant, any identified subcontractor, or any principal, partner, director, or officer of the applicant or identified subcontractor was:
- \*a) Subject to an order, judgment, or decree (including as a result of a settlement), whether by a court, an administrative agency, or other governmental body, or an arbitral or other alternative dispute resolution tribunal, in any civil proceeding or action in which fraud, gross negligence, willful misconduct, misrepresentation, deceit, dishonesty, breach of any fiduciary duty, embezzlement, looting, conflict of interest, or any similar misdeed was alleged (regardless of whether any wrongdoing was admitted or proven).

#### If yes - Please explain

\*b) Debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from transactions by any federal department or agency.

If yes - Please explain

*c) Notified that it is in default of any federal contract or grant, the reason for the default, and whether the default was cured.
If yes - Please explain
*d) Had one or more public transactions (Federal, State, or local) terminated for cause or default.
If yes - Please explain
*e) Party to litigation or a formal Alternative Dispute Resolution (ADR) process (e.g., binding arbitration) involving a claim in excess of \$50,000. For those matters involving a claim equal to or in excess of \$500,000, describe in detail the litigation or ADR process.
If yes - Please explain
Signature
By submitting this application, the applicant certifies that the facts stated and the certifications and representations made in this application are true, to the best of the applicant's knowledge and belief after due inquiry, and that the applicant has not omitted any material facts. The undersigned is an authorized representative of the applicant.
Applicant Name:  Name and Title:  Signature

## **Exhibit I**

### **EXHIBIT I: APPLICANT BUDGET TEMPLATE (Microsoft Excel File)**

Applicants are required to provide a detailed one-year program budget in Exhibit I that itemizes on a quarterly basis the legal services and administrative costs associated with the proposed program. Applicants must also provide a detailed a description of each of the line items contained in this budget and the underlying assumptions associated with each line item amount in Section D of the application form. The one-year program budget must be completed in the Microsoft Excel template provided. Instructions on the use of this template are as follows:

#### General

- a. Applicant is responsible for filling in yellow cells only.
- b. All non-yellow cells are locked and populate automatically.

# Coordinate the Provision of Legal Services (Total must be a minimum of 90% of the total LSV-H Grant Amount)

- 1. **Personnel/Labor** (Note: The spreadsheet will spread these costs evenly across all 12 months. If the applicant does not anticipate an even spread of costs, this should be explained in the narrative.):
  - Title and Organization input the titles of all LSV-H funded personnel (e.g., Program Director, Attorney, etc.) and the organization at which they are or will be employed (i.e., list applicant organization or team member organization name as applicable). Add additional lines to the spreadsheet as necessary
  - # of Full-Time Employees (FTE) input the number of FTE who will hold the specified title at the specified organization
  - % FTE input the percentage of time the staff member will devote to the LSV-H funded program (e.g., full-time staff would be shown at 100%)
  - · Base Annual Salary / Wage input the annual salary of the specified personnel, assuming full-

time employment

- Fringe Benefits cost of fringe benefits as a percentage of annual salary (if any)
- 2. **Other Non-Personnel Legal Services Expenses:** List any other legal services expenses in this section and the quarterly costs associated with those expenses.

## <u>Administrative Expenses (Total cannot exceed 10% of total LSV-H Grant Amount)</u>

- 1. If utilizing the de minimis rate of 10% of modified total direct costs for Administrative Costs (pursuant to 2 CFR 200.414(f)); enter '10% de minimis rate' in Section II of the 'Exhibit I LSV-H App Budget' Tab.
- 2. If grantee is not utilizing the de minimis rate of 10% of modified total direct costs for their Administrative Costs, they need to list all administrative expenses (Column B) and the quarterly costs associated with each expense (Columns H, I, J, and K). Per 38 CFR 79.90(d) costs for administration by a grantee must not exceed 10 percent of the total amount of the legal services grant. Administrative costs will consist of all costs associated with the management of the program, including administrative costs of subcontractors. A line item of "administrative costs" is not sufficiently descriptive. Administrative costs must be broken down into multiple line items by category. Also note that the Administrative subtotal/percentage (Cell G140) is formatted to identify if thresholds exceed the criteria specified in the NOFO.

## **Exhibit I: Applicant Budget**

The one-year program budget must be completed in the Microsoft Excel template. Only this template will be accepted. **Please click the link below to download the budget template.** Follow the embedded directions for the completion of the proposed program one-year budget. Upon completion of the budget worksheet, use the upload field to incorporate it into the application.

## **Download Microsoft Excel Budget template**

## Exhibit II

#### EXHIBIT II

Upload Resumes or position descriptions of key staff

## **Exhibit III**

#### **EXHIBIT III**

Upload Memorandums of Understanding, letters of coordination or other evidence of relevant, formal agreements.

### **Invite Grant Contacts**

Invite contacts from your Organization, to be able to register and added in the system. When registered, contact can be added in the Grant Contacts section.

#### How to invite a grant contact:

- 1. Click the envelope icon below Invitations.
- 2. Select a contact and a role in the pop-up box.
- 3. Click the Add button and fill in the invitee information.
- 4. Click Save. When you're ready to invite, click Invite.
- 5. Click the X on the top right to close out of the pop-up box.

#### **Application for Federal Assistance (SF-424)**

## Upload your signed SF-424 here:

Please fill out and sign the SF-424 that is attached to the email you received.

You may also download the SF-424 document here if needed:

#### SF-424 Form

**NOTE:** Ensure the SF-424 that is uploaded is viewable and has a true signature (wet-ink or digital/electronic). **Documents with wet-ink signatures must be scanned and uploaded. Simply typing a name in the signature block will not be acceptable.**