

# Community Prevention Partnerships

## Program Proposed Budget

April 2026-August 2027



### Applicant Information

Name of Applicant Organization:

Agency Mailing Address:

Total Annual Agency Budget:

EIN:

### Contact information

#### Agency Director/Authorized Official

Name and Title:

Phone:

E-mail:

#### Contact for Budget & Finances

Name and Title:

Phone:

E-mail:

#### Contact for Project

Name and Title:

Phone:

E-mail:

## Proposed Budget: Summary

Total Budget Request (17-month project)	
Personnel	
Payroll Tax and Fringe	
Contract Services	
Travel	
Training	
Office Expenses	
Program Expenses	
Indirect Costs	
Total Budget Request	

## Proposed Budget: Detail and Narrative

### PERSONNEL

Requirements
<ul style="list-style-type: none"><li>A <a href="#">daily time tracking log</a> is required for any position being paid with multiple sources of funding (Federal, State, and/or non-OJP funding).</li><li>List all staff positions charged to the grant on a separate line item. Budget the gross pay for each position.</li><li>Include each position's job title, current FTE, % billed to the grant, and hourly rate calculation for the entire grant period.</li><li>Wages includes overtime pay, holiday pay, paid leave time, and staff bonuses in accordance with agency policy, and must be billed in proportion to the actual hours worked on the project.</li></ul>
Allowable Expenses
<ul style="list-style-type: none"><li>Staff hours related to the program - (e.g. conducting outreach, completing program documentation, reports and statistics, conducting program evaluation, partnerships and collaboration, etc.)</li><li>Supervision hours of program staff</li><li>Paid internships (if contracted, budget under contract services category)</li><li>Executive leadership, administrative, facility, and support staff hours directly related to the project - Note that these positions cannot also be included in agency's indirects (if applicable, see indirects section below).</li></ul>
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Name and Title	Annual Rate of Pay	% Time on Project	Amount Requested per Personnel (17-month Project)
Example: Outreach Coordinator	\$50,000	50%	\$35,917

**Total Personnel Amount Requested: (17-month project):**

**Budget Narrative/Justification:**

Example: Outreach Coordinator - \$50,000 x .5 FTE x 17 mos. (including 3% COLA on 1/1/27) = \$18,750 (Apr-Dec 2026 wages) + \$17,167 (Jan-Aug 2027 wages) = \$35,917

## PAYROLL TAX & FRINGE

Requirements
<ul style="list-style-type: none"><li>Must be billed to the grant based on the % of actual hours worked on the program.</li></ul>
Allowable Expenses
<ul style="list-style-type: none"><li>Payroll taxes includes <u>employer-paid</u> federal/state payroll taxes, FICA, Medicare, worker's compensation, unemployment insurance</li><li>Fringe benefits include <u>employer-paid</u> health/dental/vision insurance, pension, disability insurance, etc.</li><li>Retirement contribution match for grant-funded positions (based on actual hours worked on the grant)</li></ul>
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Payroll Taxes & Fringe	Total Amount Requested per Benefit (for 17-month Project)
Example: Outreach Coordinator	\$8,260.91

Total Payroll Taxes & Fringe Amount Requested (17-month project):	\$
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### Budget Narrative/Justification:

Example: Outreach Coordinator wages (\$35,917) x 23% Fringe (Workers Comp, FICA, Medicare, Unemployment, medical and dental insurance, retirement contribution) = \$8260.91

## CONTRACT SERVICES

<b>Requirements</b>
<ul style="list-style-type: none"><li>• Maximum hourly rate allowed is \$81.25/hour or \$650/day</li><li>• Written contract must be in place and pre-approved by Grant Manager if over \$10K</li><li>• Proper <a href="#">documentation of bidding process</a> in place for all contracts over \$10k</li><li>• Contract must list start and end dates, “not to exceed” amount, specific statement of purpose/deliverables and hourly rate</li><li>• Contractor must provide detailed and timely invoices to grantee listing out all hours billed and services provided</li></ul>
<b>Allowable Expenses</b>
<ul style="list-style-type: none"><li>• Contracted service provider to provide key project components (group facilitator, licensed mental health provider, etc.)</li><li>• Contracted provider for program evaluation, needs assessment, focus groups, curriculum development, training, etc.</li><li>• Contracted providers for language access (interpreters, translation of program materials, etc.)</li></ul>
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<b>Contract Service</b>	<b>Amount Requested per Contract Service (for 17-month Project)</b>
Example: Language Translation and Interpretation Services	\$575

<b>Total Contract Services Amount Requested (17-month project):</b>	<b>\$</b>
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### **Budget Narrative/Justification:**

Example: Language Translation and Interpretation Services - Approximately \$250 for translation of written materials + \$81.25 per hour x 4 hours for interpretation during educational presentations = \$575

## TRAVEL

<b>Requirements</b>
<ul style="list-style-type: none"><li>• Mileage reimbursement must not exceed <a href="#">current IRS rate</a></li><li>• <a href="#">Out-state Travel Request Form</a> should be submitted well in advance to your grant manager for approval</li><li>• Shared vehicle expenses (mileage and maintenance) must be associated with program purpose and proper documentation kept (i.e. mileage logs). Can be charged using an allocated rate or by actual mileage used by grant program, whichever is less.</li></ul>
<b>Allowable Expenses</b>
<ul style="list-style-type: none"><li>• Staff mileage to and from trainings, conferences, meetings, program activities, and program events</li><li>• Vehicle lease or rental for transporting program participants (pre-approval from grant manager required)</li><li>• Staff meals and parking expenses for program related travel</li><li>• Out-state travel, includes rental car, taxi/uber, airfare, etc. for trainings/conferences (pre-approval from grant manager required)</li></ul>
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<b>Travel Expenses</b>	<b>Amount Requested per Travel Expense (for 17-month Project)</b>
Example: Staff Mileage	\$210

<b>Total Travel Amount Requested (17-month project):</b>	<b>\$</b>
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### **Budget Narrative/Justification:**

Example: Approximately 300 miles x 0.70 per mile = \$210

## TRAINING

<b>Requirements</b>	
<ul style="list-style-type: none"><li>• Meal reimbursements must not exceed <a href="#">DPS State Travel Policy</a> rates</li></ul>	
<b>Allowable Expenses</b>	
<ul style="list-style-type: none"><li>• Speaker fees - not to exceed \$650/day or \$81.25/hr.</li><li>• Training and conference registration fees, hotel/lodging, meal reimbursements</li><li>• Hosted training expenses (space/audio equipment rental, training materials, CLEs/CEUs, etc.)</li></ul>	
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<b>Training</b>	<b>Amount Requested per Training Opportunity</b> (for 17-month Project)
Example: Registration for MPRC Conference	\$360

<b>Total Training Amount Requested (17-month project):</b>	<b>\$</b>
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### **Budget Narrative/Justification:**

Example: Registration fee for conference = \$180 x 2 staff = \$360

## OFFICE EXPENSES

Requirements
<ul style="list-style-type: none"><li>Allocation method must be on file if using cost allocation method to bill expenses to the grant</li><li>Only expenses directly related to the grant program may be charged at 100% to the grant</li><li>Reimbursement of employee personal cell phones when used for work must be a reasonable rate based on actual expenses</li><li>Memberships and insurance costs charged to the grant must fall within the grant period</li></ul>
Allowable Expenses
<ul style="list-style-type: none"><li>Office supplies (paper, printing, pens, ink/toner, cleaning supplies, etc.)</li><li>Phone/internet (leases, maintenance, service, staff cell phone purchase)</li><li>Computer/laptop, computer supplies (monitor, printer, mouse, keyboard, docking station, etc.)</li><li>Background check fees for staff/volunteers, staff recruitment costs</li><li>Business costs (insurance, payroll, direct deposit fees, marketing, database user fees, IT support, software, website, etc.)</li><li>Building expenses including rent, utilities, insurance, maintenance, etc.</li></ul>

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Office Expenses	Amount Requested for Office Expenses (for 17-month Project)
Example: Technology equipment	\$700

<b>Total Office Expenses Amount Requested (17-month project):</b>	<b>\$</b>
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### Budget Narrative/Justification:

Example: 1 laptop for Outreach Coordinator (\$600) + computer accessories (\$100) = \$700

## PROGRAM EXPENSES

Requirements
<ul style="list-style-type: none"><li>• Only expenses directly related to the grant program may be charged at 100% to the grant</li><li>• Must use an allocation method to charge other general agency expenses to the grant</li><li>• Participant stipends can be paid for in check, gift card, or other form; agency must have policy for authorization, receipt from participant, proof of payment, etc.</li></ul>
Allowable Expenses
<ul style="list-style-type: none"><li>• Curriculum, resource materials</li><li>• Group activity supplies/materials (support group activity supplies, art supplies, journals, etc.) and event/retreat/field trip expenses (meals, lodging rental, etc.)</li><li>• Outreach supplies (swag kits, apparel, candy, tabling supplies, etc.)</li><li>• Bulk purchase of basic needs items to have on hand for participants (clothing, hygiene products, snacks, water, etc.)</li><li>• Participant stipends for program contributions (focus groups, evaluation, youth advisory boards, etc.)</li></ul>
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Program Expenses	Amount Requested per Program Expense (for 17-month Project)
Example: Prevention Curriculum	\$500

Total Program Expenses	Amount Requested (17-month project):	\$
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### Budget Narrative/Justification:

Example: Cost to purchase curriculum to use in high school classes

## INDIRECT COSTS

Requirements
<ul style="list-style-type: none"><li>Overhead expenses not easily identified or broken out by program; See <a href="#">indirect cost overview</a> for more information</li><li>Must use <a href="#">federally approved indirect cost rate</a> or up to the <a href="#">15% de minimis</a> with Indirect Cost Rate Request Form on file</li><li>Cannot include any expenses that are elsewhere in the budget or directly charged to the grant</li></ul>
Allowable Expenses
<p>Overhead expenses not easily identified or broken out by program, which fall under two categories below:</p> <p><b>Facilities:</b> Facilities staff, depreciation on buildings, equipment and capital improvements, and operations and maintenance expenses.</p> <p><b>Administration:</b> General administration and general expenses such as the director's office, HR, accounting, personnel, and all other types of expenditures not listed specifically under one of the subcategories of "Facilities."</p>
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<b>Total Indirect Cost Amount Requested</b> (17-month project):	\$
Example:	<b>\$8,475</b>

### Budget Narrative/Justification:

Example: Total direct costs (\$56,500) x 15% de minimis = \$8,475