



FY 2020-2021 Application for Access and Visitation Grants Funding

Summary of Grant

The Administrative Office of the Courts has funding available for the development or continuation of initiatives that address the needs of never-married parents and focus on services to help them resolve any or all issues concerning parenting and visitation in child support cases or cases involving child support issues. The funds allocated for the Tennessee's Access and Visitation Program, under provisions of section 469B of the Title IV-D of the Social Security Act as amended, are to provide initiatives intended to address the needs of never-married parents, emphasizing parenting time issues of families and non-custodial parents in the Title IV-D program. This funding is made possible through the Federal Access and Visitation Grant administered through the Tennessee Department of Human Services. The grants shall be for services performed during the time period of October 1, 2020 through September 30, 2021.

Types of Approved Initiatives for Grant Funding

- ♦ Mediation between never-married parents, non-custodial parents and/or caretakers; utilizing in-person, telephonic and online platforms;
- ♦ Parental education for never-married parents, non-custodial parents and/or caretakers on co-parenting, development or parenting plans and/or other parental access and visitation issues (including conflict resolution related to access and visitation) utilizing in-person, telephonic and online platforms;
- ♦ Development of parenting plans for never-married parents, non-custodial parents and/or caretakers, utilizing in-person, telephonic and online platforms;
- ♦ Legal information or legal services for self-represented litigants on parenting time issues for never-married, non-custodial parents, and/or;
- ♦ Supervised Visitation.



FY 2020-2021 Application for Access and Visitation Grants Funding

Requirements for Funding

- ◆ Proposals must be received by **Friday, August 28, 2020**. Notification of grant awards will be sent on or about **Friday, September 18, 2020**;
- ◆ Completed application submitted as PDF file via email to grants@tncourts.gov;
- ◆ Signed by the presiding judge of the trial court in the district OR the judge(s) presiding over the court(s) in which the litigants will be assisted by the initiative;
- ◆ FY 2020-2021 Completed Financial Budget Form (Attached);
- ◆ FY 2020-2021 Title VI Pre-Award Survey (Attached);
- ◆ FY 2020-2021 Title VI Statement of Assurances (Attached);
- ◆ One letter of support from each judge your project / program will be working with OR the presiding judge for the county/district to be served;
- ◆ If your organization is incorporated, attach the following:
 - a) copy of corporation charter ;
 - b) copy of IRS exemption letter;

Note: Even if you have provided these documents in the past and nothing has changed, you must submit these documents with your application.

Eligibility of Applicants

- ◆ Applicant's services **must** focus on never-married parents, caretakers and/or non-custodial parent;
- ◆ Applicants **must** have the support of judicial personnel and magistrates at the local Juvenile Court and/or the court that handles child support order establishment cases and a commitment from this court to refer never-married parents who need help developing a parenting time plan and obtaining a court order;
- ◆ Applicants **must** agree to use a client Intake Form that will be developed by TN DHS
- ◆ Applicants **must** be a unit of government or a non-profit organization;
- ◆ Applicants **must** be servicing communities within the state of Tennessee;
- ◆ Applicants **may** seek funding for existing initiatives or for new initiatives.

Part 1 | Applicant Information

[Note: If any item in the application is not applicable, please note as such and explain.]

Applicant Name: _____

Non-profit Corporation

Government Agency

Street Address: _____

City: _____ State: _____ Zip code: _____

Telephone #: _____ Fax #: _____

E-Mail Address: _____ Tax ID #: _____

Executive Director (if applicable):

Name: _____ Email Address: _____

Program Administrator and Contact Information:

Name: _____

Address: _____

Telephone: _____ E-Mail Address: _____

Qualifications: _____

Presiding Judge:

Name: _____ Signature: _____ Date: _____

Application Filled by

Name: _____ Email: _____ Phone: _____

To Find More Information Visit: tncourts.gov/programs/rfpsgrants

Part 2 | Program Information

[Note: If any item in the application is not applicable, please note as such and explain.]

Types of Access and Visitation Services Provided: (Select all that apply)

- Mediation
- Developing Parenting Plans
- Legal information or legal services for self-represented litigants
- Supervised Visitation
- Parent Education

Previous Grant Year Statistics: (fill N/A if new applicant)

Number of Parents Served: _____ Number of Children Served: _____

<u>County Served</u>	<u>Number Served</u>	<u>Judicial District</u>	<u>Agency/Court Served</u>

Upcoming Grant Year Projection:

Expected number of Parents Served: _____ Expected number of Children Served: _____

<u>County Served</u>	<u>Number Expected to be Served</u>	<u>Judicial District</u>	<u>Agency/Court Served</u>

Organizational Questions:

- Are there plans to collaborate with other organizations? Yes No
- Are there other organizations that provide similar services in your area? Yes No
- Does your organization have access to language interpreters to participate in the services being provided? Yes No

Part 2 | Program Information (Cont.)

[Note: If any item in the application is not applicable, please note as such and explain.]

Program Staff:

How many staff members work on A&V initiatives? (Including support staff) _____

List the related qualifications that your staff possesses:

Budget Statistics:

Previous 2019-2020 A&V Grant Funding: _____

Requested 2020-2021 A&V Grant Funding: _____

Total Organizational Budget for A&V Services: _____

Other Sources of Funding for A&V Services: (Select all that apply)

Other Grants

Donations

Other

Paid Services

Fundraising

Explain: _____

Part 3 | Narrative Information

1. Briefly describe your organization's mission. (3-5 sentences)
2. Please describe how your organization will be providing all of the services listed previously in the application. (See "Types of Access and Visitation Services Provided" for list of possible services)
3. If developing or expanding your program, describe the goals, planned activities, and a timetable for completion of the initiative(s).
4. Describe existing or projected community involvement and support for the program/project.
5. Specifically list and detail any other federal or state grant funding for which you have applied and/or are receiving for this initiative.

Part 3 | Narrative Information (Cont.)

6. Identify other organizations or projects within the geographical service area that provide the same or similar service. Describe any collaboration with the organizations listed.

7. Define the specific need of these services in regards to your geographic or regional area.

8. Detail how your organization is planning to use a diversity of service platforms (i.e. video conferencing, e-filing, etc.) in order to provide non-contact services to your clients.

9. Describe how the proposed activities will further the goals of the Access and Visitation program. Specifically how proposed funding of initiative will address the needs of never-married parents and focus on services to help them resolve any or all issues concerning parenting and visitation in child support cases or cases involving child support issues.

Attachment 1 | FY 2020-2021 Financial Budget Form

[For services rendered between October 1, 2020 – September 30, 2021]

Total Amount Requested _____

Amount Requested for Services: _____

Amount Requested for Administrative: _____

Service Costs:

<u>Category</u>	<u>Access & Visitation Grant Funds Requested</u>	<u>Amount from Other Funding Sources</u>	<u>Total Budget</u>
<u>Professional Staff (Number: _____)</u>			
<u>Support Staff (Number: _____)</u>			
<u>Other Staff</u>			
<u>Employee Benefits</u>			
<u>Program Travel</u>			
<u>Total</u>			

Administrative Costs:

<u>Category</u>	<u>Access & Visitation Grant Funds Requested</u>	<u>Amount from Other Funding Sources</u>	<u>Total Budget</u>
<u>Space</u>			
<u>Utilities</u>			
<u>Equipment</u>			
<u>Office Supplies</u>			
<u>Telephone</u>			
<u>Training</u>			
<u>Insurance</u>			
<u>Dues/Fees</u>			
<u>Other – itemize on separate sheet</u>			
<u>Total</u>			

Attachment 2 | Title VI Pre-Award Survey

**Administrative Office of the Courts
Title VI Pre-Award Survey
Federal FY 2020-2021 Grant Period (October 1, 2020 – September 30, 2021)
(for recipients of federal funds)**

Date of Survey: _____

Name of Entity: _____

Name of Title VI Coordinator: _____

1. Is your organization minority owned or run by minority individuals? Yes ____ No ____

If yes, identify the race(s) of the owner or individual(s) running the organization.*

If no, what are the percentages of the racial composition of the board or advisory group?*

____ Hispanic or Latino ____ White (not Hispanic or Latino) ____ Black or African American (not Hispanic or Latino) ____ Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) ____ Asian (Not Hispanic or Latino) ____ American Indian or Alaska Native (Not Hispanic or Latino) ____ Two or More Races (Not Hispanic or Latino).

What steps are being taken to obtain minority representation, if in your geographic service area, minorities represent 5% of the population or more?

2. Nondiscrimination Policies: Does your institution have a written policy stating that services or opportunities will be provided to all persons without regard to race, color, or national origin?

Yes ____ No ____

3. Are permanent records kept of all Title VI complaints? Yes ____ No ____

4. In the past twelve months, has your entity/institution received any complaints alleging a Title VI violation? Yes ____ No ____ If Yes, attach a description of the nature of the complaint and its disposition.

5. Are Title VI information and non-discrimination notices disseminated to your employees or other beneficiaries of services? Yes ____ No ____ If yes, describe how employees and/or beneficiaries are informed (posters displayed, brochures displayed, etc.)

Do the notices contain contact information if someone has a Title VI or discrimination complaint? Yes ____ No ____

6. Do you have written policies and procedures addressing Title VI? Yes ____ No ____

7. How do you to ensure that minorities are effectively made knowledgeable about your services?

8. When did you last conduct Title VI training for your staff? ____/____/____

How often do you provide the training/refreshment training to your staff? _____

9. Please indicate as of this date, the percentages of the racial composition of those that currently receive your program's services.*

____ Hispanic or Latino ____ White (not Hispanic or Latino) ____ Black or African American (not Hispanic or Latino) ____ Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) ____ Asian (Not Hispanic or Latino) ____ American Indian or Alaska Native (Not Hispanic or Latino) ____ Two or More Races (Not Hispanic or Latino).

10. Please indicate as of this date, the percentages of the racial composition of your programs staff. *

____ Hispanic or Latino ____ White (not Hispanic or Latino) ____ Black or African American (not Hispanic or Latino) ____ Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) ____ Asian (Not Hispanic or Latino) ____ American Indian or Alaska Native (Not Hispanic or Latino) ____ Two or More Races (Not Hispanic or Latino).

11. Please indicate as of this date, the percentages of the racial composition of your program's volunteers.

____ Hispanic or Latino ____ White (not Hispanic or Latino) ____ Black or African American (not Hispanic or Latino) ____ Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) ____ Asian (Not Hispanic or Latino) ____ American Indian or Alaska Native (Not Hispanic or Latino) ____ Two or More Races (Not Hispanic or Latino).

Declaration of Applicant:

I declare that I have completed the data in this self-survey and to the best of my knowledge and belief, it is true, correct, and complete.

Signature: _____ Date: _____

Position of Individual Completing Survey: _____

** Race and ethnic designations as used by the Equal Employment Opportunity Commission do not denote scientific definitions of anthropological origins. Definitions of the race and ethnicity categories are as follows:*

Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (Not Hispanic or Latino) - A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino) - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino) - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino) - All persons who identify with more than one of the above five races.

Attachment 3 | Title VI Requirements and Assurance of Compliance

Title VI Requirements and Assurance of Compliance

Title VI of the Civil Rights Act of 1964, as codified in 42 U.S.C. 2000(d), states that:

No person in the United States shall, on the ground of race, color or national origin, be excluded from participation in, be denied the benefits of, or be subject to discrimination under any program or activity received federal financial assistance.

The below signed applicant (“Applicant”) hereby agrees that it will comply with Title VI of the Civil Rights Act of 1964, and any directives or regulations issued pursuant thereto, and specifically will ensure that no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subject to discrimination under any program or activity for which the Applicant receives Federal financial assistance from the Administrative Office of the Courts and **HEREBY GIVES ASSURANCE THAT** it will immediately take any measures necessary to effectuate this assurance.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining any and all Federal financial assistance, grants and loans of Federal funds, and reimbursable expenditures, grants or donation of Federal property and interest in property, the detail of Federal personnel, the sale of and lease of, and the permission to use, Federal property or interest in such property or the furnishing of services without consideration or at a nominal consideration, or at a consideration which is reduced for the purpose of assisting the recipient, or in recognition of the public interest to be served by such sale, lease, or furnishing of services to the recipient, or any improvements made with Federal financial assistance extended to the Applicant by the Administrative Office of the Courts.

BY ACCEPTING THIS ASSURANCE, the Applicant agrees to compile data, maintain records, and submit reports as required to permit effective enforcement of Title VI, and permit the Administrative Office of the Courts personnel during normal working hours to review such records, books, and accounts as needed to ascertain compliance with Title VI. If there are any violations of this assurance, the Administrative Office of the Courts shall have the right to seek administrative and/or judicial enforcement of this assurance. **In addition, the Applicant agrees to provide training to staff and volunteers pursuant to the training standards as set by the Administrative Office of the Courts.**

This assurance is binding on the Applicant, its successors, transferees, and assignees as long as it receives assistance from the Administrative Office of the Courts. In the case of real property, this assurance is binding for as long as the property is used for a purpose for which this assistance was intended or for the provision of services or benefits similar to those originally intended. In the case of personal property, this assurance applies for as long as the recipient retains ownership or possession of the property. The person or persons whose signatures appear below are authorized to sign this assurance on the behalf of the applicant.

Notwithstanding the above, potential grantees/contractors may contact:

- 1. Staff of the Governor’s Office of Diversity Business Enterprise for assistance available to minority-owned, women-owned, and small businesses as well as general, public information relating to contracts; and**

2. **The following individual designated by the Courts to coordinate compliance with the nondiscrimination requirements of the State of Tennessee, Title VI of the Civil Rights Act of 1964, the Americans with Disabilities Act of 1990, and associated federal regulations:**

**Stephanie Holliday, Human Resources Manager
Administrative Office of the Courts
511 Union Street, Suite 600
Nashville, TN 37219
615-741-2687**

Name of Organization:

Signature: _____ Date: _____