



# FY 2022 Overview of the DFC Notice of Funding Opportunity (NOFO) for New Applicants

## **Helen Hernandez, MPH**

Assistant Director, Office of Drug-Free Communities  
Office of National Drug Control Policy (ONDCP)

## **Karen Voetsch, MPH**

Branch Chief, Drug-Free Communities Branch  
Division of Overdose Prevention, NCIPC, CDC



# DFC Program Partners

## White House Office of National Drug Control Policy (ONDCP)

- Component of the Executive Office of the President (EOP)
- Funder and administrator of the DFC and CARA grant programs

## National Center for Injury Prevention and Control (NCIPC)

- Provides the day-to-day management of the DFC and CARA programs
- Home to the Project Officers and Grants Management Specialists

## DFC & CARA National Evaluation Team

- ONDCP contract awarded to ICF to evaluate the effectiveness of the DFC and CARA program

## Community Anti-Drug Coalitions of America (CADCA)

- ONDCP grant recipient of the National Coalition Institute (NCI)
- Provides training and coalition development support to coalitions across the country



# Outline of the DFC NOFO Workshop

## Part 1:

**Overview** of the DFC Program

**What** are the statutory eligibility requirements for the DFC grant

**How** you prove and document your eligibility (attachments, project narrative, & 12-month action plan)

**What else** is needed (additional documentation)

## Part 2:

**What** to include in your Project Narrative

**How** the project narrative will be reviewed and scored

**What else** is needed: Budget & Other Required Documents

## Part 3:

Helpful hints and Q&A



# DFC Program Goals

- To **establish and strengthen collaboration** among communities, nonprofit agencies, and Federal, state, local and tribal governments to support the efforts of community coalitions to prevent and reduce substance use among youth
- To **reduce substance use among youth** and, over time, reduce substance abuse among adults by addressing the factors in a community that increase the risk of substance use and promoting the factors that minimize the risk of substance use



# Definition of a Coalition

A community-based formal arrangement for cooperation and collaboration among groups or sectors of a community in which each group retains its identity, but all agree to work together toward a common goal of building a safe, healthy, and drug-free community.



# Community of Focus

Coalitions are encouraged to pay particular attention to communities or populations disproportionately affected by substance use.

- Do not define a community that is too large for your coalition to address
- Pay attention to natural delineations within the community
  - School districts
  - Demographics
  - Geographic Boundaries

# Theory of the DFC Program

- A small amount of **Federal funding combined with a local match** of resources and volunteer support can reduce youth drug use
- By **mobilizing community leaders** to identify and respond to the drug problems unique to their community, DFC is designed to change local community environmental conditions tied to substance abuse the **entire community environment**
- Focusing on **environmental change** ultimately contributes to reductions in substance use among youth, and over time, substance abuse among adults



# Statutory Eligibility Requirements

- In order to be eligible to apply to the DFC Program, applicants must meet all of the DFC Statutory Eligibility Requirements
- Failure to meet any one DFC Statutory Eligibility Requirement will:
  - deem the application ineligible; and
  - application will not proceed to peer review
- Additional information may not be added to an application after the application deadline. It is the responsibility of the applicant to submit a complete application prior to the application deadline.

## STATUTORY REQUIREMENTS

- 12 Required sectors
- Six-month existence
- Mission statement
- Multiple drugs of use
- National cross-site evaluation

- Eligible to receive federal grants
- Match from non-federal sources
- Limited to \$125,000/year
- Zip code overlap
- No more than 10 years of DFC funding

# Location of DFC NOFO

- Visit [www.grants.gov](https://www.grants.gov) and type in “DFC” in the search bar
- Make sure you click on the correct NOFO: **CDC-RFA-CE22-2205**
- Click on “Related Documents” tab to download the NOFO, attachments, & appendices

## VIEW GRANT OPPORTUNITY



CDC-RFA-CE22-2205  
Drug-Free Communities (DFC) Support Program- NEW  
Department of Health and Human Services  
Centers for Disease Control - NCIPC

**SYNOPSIS** **VERSION HISTORY** **RELATED DOCUMENTS** **PACKAGE**

Click on the following file link(s) to download the related document(s):

File Description	File Name
Folder: Full Announcement - Full Announcement	<a href="#">CDC-RFA-CE22-2205-Full Announcement - Full Announcement.zip</a>
Foa_Content_of_CDC-RFA-CE22-2205 (5).pdf	<a href="#">Foa_Content_of_CDC-RFA-CE22-2205 (5).pdf</a>
Folder: Other Supporting Documents - Other Supporting Documents	<a href="#">CDC-RFA-CE22-2205-Other Supporting Documents - Other Supporting Documents.zip</a>
Appendices	<a href="#">CDC-RFA-CE22-2205 Appendices_Final (2).docx</a>
CDC-RFA-CE22-2205 Attach-ments_Final (2).docx	<a href="#">CDC-RFA-CE22-2205 Attach-ments_Final (2).docx</a>

Direct Link to NOFO: <https://www.grants.gov/web/grants/view-opportunity.html?oppId=334908>

# Important Sections of the NOFO

- **Section A:** Funding Opportunity Description – outlines ONDCP/CDC's expectations;
- **Section C:** Eligibility Information – including statutory eligibility requirements;
- **Section D:** Application & Submission information – which outlines what you need to submit to CDC for consideration for funding;
- **Section E:** Review & Selection Process – how the applications will be assessed and scored.
- **Section H: Other Information** (lists out attachments: there are 5)



# Statutory Eligibility Requirements and Evidence You Must Provide



# Statutory Eligibility Requirements Table

- Found in the Eligibility Information, Additional Information on Eligibility
- Outlines each statutory requirement, the evidence required, and where to document the information
- Failure to meet **any** single statutory eligibility requirement will cause the application to be deemed ineligible; in such case, it **will not** move forward to merit review.

Eligibility Requirement Item	Evidence Required and Where to Document
<b>Requirement 1: 12 Sectors</b>	
<p>The coalition must consist of one or more representatives from each of the following required 12 sectors:</p> <ol style="list-style-type: none"> <li>1. Youth</li> <li>2. Parent</li> <li>3. Business</li> <li>4. Media</li> <li>5. School</li> <li>6. Youth-serving organization</li> <li>7. Law enforcement</li> <li>8. Religious/Fraternal organization</li> <li>9. Civic/Volunteer groups (i.e., local organizations committed to volunteering, not a coalition member designated as a "volunteer")</li> <li>10. Healthcare professional or organization (i.e., primary care, hospitals, etc.)</li> <li>11. State, local, or tribal governmental agency with expertise in the field of substance use (including, if applicable, the state agency with primary authority for substance use)</li> <li>12. Other organizations involved in reducing substance use</li> </ol> <p>21 USC 1532(a)(2)(A)  An individual who is a member of the coalition may serve on the coalition as a representative of not more than one sector category.</p> <p>21 USC 1532(a)(2)(C)</p>	<p><b>Evidence Required: The Sector Table and 12 Coalition Involvement Agreements</b> that includes each of the 12 required sectors of a community as outlined in the DFC Act. See Appendix C. Sample Coalition Involvement Agreement.</p> <p><b>Where to Document:</b></p> <ul style="list-style-type: none"> <li>• <b>Attachment 1: Sector Table and 12 Coalition Involvement Agreements (CIAs)</b></li> </ul> <p>Coalition members can not represent more than one sector category and paid staff (i.e., Program Director/Principal Investigator (PD/PI) and Project Coordinator) cannot serve as sector representatives. Doing so will deem an application ineligible.</p>
<b>Requirement 2: Six Month Existence</b>	
<p>The coalition must demonstrate that members have worked together on substance use reduction initiatives for a period of not less than 6 months at the time of submission of the application, acting through entities such as task forces, subcommittees, or community boards. 21 USC 1532(a)(3)(A)</p> <p>The coalition must also demonstrate</p>	<p><b>Evidence Required: The date that the coalition was established and one set of meeting minutes.</b></p> <p><b>Where to Document:</b></p> <ul style="list-style-type: none"> <li>• <b>Attachment 4: General Applicant Information, Question #6</b></li> <li>• <b>Upload: One set of coalition meeting minutes from one meeting that took place</b></li> </ul>

# Requirement 1: 12 sectors

The coalition must consist of representatives from each of the following required 12 sectors

- |                                |   |
|--------------------------------|---|
| 1. Youth                       | 7. Religious/Fraternal Organizations    |
| 2. Parent                      | 8. Law Enforcement                      |
| 3. Business                    | 9. Civic/Volunteer Groups               |
| 4. Media                       | 10. Healthcare Professionals            |
| 5. School                      | 11. State/Local/Tribal Government       |
| 6. Youth-Serving Organizations | 12. Other Substance Abuse Organizations |

**Evidence you must provide:** Attachment 1. Sector Table and 12 Coalition Involvement Agreements and 12 signed CIAs\*



# Attachment 1: Sector Table & 12 CIAs

- The Sector Table clearly identifies the representatives serving each of the 12 sectors.
- Fill in all boxes of the Sector Table, including Sector Representative Name, Organization Name, and **Selection Rationale**.
- The sector representatives identified on the Sector Table must match the CIAs provided as part of the DFC application. Include the name of the individual, their organization, and a strong rationale describing why the individual was selected to represent that sector. The rationale must adhere to the sector definitions included in the NOFO.

Attachment 1. Sector Table

Coalition Name:			
Sector	Sector Representative Name	Organization Name	Selection Rationale
Youth		<i>Age of Youth:</i>	
Parent			
Business			
Media			
School			
Youth-Serving Organization			
Religious or Fraternal organization			
Law enforcement (not retired)			
Civic/Volunteer groups			
Healthcare professional or organization			
State, local, or tribal gov't agency with expertise in substance abuse			
Other organizations involved in reducing substance abuse			

# Requirement 1: 12 sectors

- **Coalition Involvement Agreements (CIA):** The CIA is an agreement between the coalition and the selected sector representatives that clearly identifies the agreed upon responsibilities for both the coalition and the sector representative.
  - You **must** have a CIA for each sector
  - Each of the 12 different Sector Representatives will sign a CIA, and the Coalition Representative will sign all 12 CIAs
  - CIAs must reflect current membership and must be signed and dated AFTER January 1, 2021
  - Sample CIAs are provided in Appendix C

Name the file “**Attachment 1\_Sector Table and 12 CIAs**” and upload as a single PDF attachment into grants.gov.

## APPENDIX C: SAMPLE COALITION INVOLVEMENT AGREEMENT

### Coalition Involvement Agreement between

[ Coalition name ]  
and  
[ Name of sector representative ], representing the [ Insert one of the 12 sectors here ]

[ Coalition name ] is responsible for:

1. Creating and following by-laws and policies.
2. Formulating coalition goals and objectives.
3. Overseeing operations of activities, programs, and paid staff.
4. Increasing new membership of the coalition.
5. Creating and following a strategic 12-Month Action Plan.
6. Creating a credible and relevant sustainability plan including volunteer membership and resources, both financial and material.
7. Respecting the rights of Coalition members to hold their own opinions and beliefs.
8. Other responsibilities as needed, etc.

[ Name of sector representative ], representing the [ Insert one of the 12 sectors here ], is responsible for:

1. Being a community leader amongst the represented sector.
2. Ensuring clear communication between the sector represented and the coalition.
3. Acting as a positive role model for youth, families, and peers.
4. Supporting the coalition's mission.
5. Attending coalition meetings which are held on a / / basis.
6. Participating on at least one subcommittee.
7. Attending coalition sponsored trainings, town hall meetings, and other community events.
8. Contributing to the strategic action planning process.
9. Participating in sustaining the coalition's capacity, involvement, and goals.
10. Preventing youth substance use through environmental strategies.
11. Using his/her activities as match, if applicable.
12. Other responsibilities as needed, etc.

By signing this Agreement, the individuals are affirming that he/she represents one of the 12 required sectors and are committing to the responsibilities described.

COALITION REPRESENTATIVE	SECTOR REPRESENTATIVE
Name and Title	Name and Sector
Signature and Date	Signature and Date

**NOTE:** Form must be dated after January 2021 and must be signed. Missing signatures or incomplete forms will result in the entire application being deemed as INELIGIBLE and the application will not be considered for funding. Handwritten and/or electronic signatures are acceptable.

## Requirement 2: Six-month existence

- Coalition must demonstrate that members have worked together on substance use reduction initiatives for a period of not less than 6 months at the time of submission of the application
- **Meeting Minutes**
  - Minutes for a coalition meeting that took place between **January 2021 and the deadline** for the submission
  - Must be the coalition's minutes, not those of an outside agent applying on behalf of the coalition
  - Must demonstrate a focus on youth substance use prevention
  - Must include a list of all attendees by sector and the month, day, and year of the meeting

Name the file “**Coalition Minutes**” and upload as a PDF to [grants.gov](https://grants.gov) and complete **Q6 on Attachment 4. General Applicant Information Form**

# Requirement 3: Mission Statement

- Coalition **must have** as its principal mission the **reduction of substance use**, with a **primary focus on reducing youth substance use**
- Must be the ***coalition's*** mission-- not that of an outside agent applying on behalf of the coalition



Complete **Q4 on Attachment 4. General Applicant Information Form** and include within **Project Narrative**

# Requirement 4: Multiple Drugs

- Multiple drugs **must** be addressed
  - Indicate multiple drugs that you will address in your community
  - Cannot be an “underage drinking” coalition that does not address other drugs
  - **Do not use the** terms “Alcohol, Tobacco, and Other Drugs (ATOD)”, “substances” or “substance abuse” to account for all substances
  - Vaping is not a substance

Complete **Q5 on Attachment 4. General Applicant Information Form** and include within **Project Narrative** and **12-month action plan**

# Requirement 5: National Cross-Site Evaluation

- Applicants need to describe an evaluation and performance measurement plan that includes **how** the applicant will collect and report the DFC Program's required measures.
- Applicants **are not required** to be in compliance with the DFC National Cross-Site Evaluation Requirements **at the time of application**.

## DFC Core Measures

- Past 30-day use
- Perception of Risk/Harm of Use
- Perception of Parental Disapproval
- Perception of Peer Disapproval

On **four substances**: Alcohol, Tobacco, Marijuana and Prescription Drugs

In at least **three grades**: 6<sup>th</sup>-12<sup>th</sup>

Every **two years**

Describe within the **Applicant Evaluation and Performance Measurement Plan** section of the **Project Narrative**

# Requirement 6: Eligible to Receive Federal Grants

Applicants must select one of the following options in **Attachment 3**:

☐ **OPTION 1. The Coalition is a 501(c)(3) organization.**

The Coalition is a 501(c)(3) organization applying on its own behalf. The Coalition's name is listed on the SF- 424 in Box #8 with the **Coalition's Employer/Taxpayer Identification Number (EIN/TIN)**. As the legal applicant, the Coalition must submit:

- a. **Proof of 501(c)(3) status**
- b. **Signed Statement of Legal Eligibility**

☐ **OPTION 2. The Coalition is not a 501(c)(3) organization.**

The Coalition **MUST** use a Fiscal Agent to apply on its behalf. The Fiscal Agent's name is listed on the SF-424 in Box #8 with the **Fiscal Agent's Employer/Taxpayer Identification Number (EIN/TIN)**. As the legal applicant, the fiscal agent must submit:

- a. **Signed Memorandum of Understanding (MOU)**
- b. **Signed Statement of Legal Eligibility**



# Requirement 6: Eligible to Receive Federal Grants

## Option 1

A coalition with **501(c)(3) status** that is serving as the legal entity.



## Evidence you must provide:

- Check the box for Option 1
- Complete and sign **Attachment 3 Statement of Legal Eligibility**
- Upload **the letter from the IRS indicating 501(c)(3) status**
- Name the file: “**Attachment 3\_Statement of Legal Eligibility**” and upload both documents as a PDF to Grants.gov

# Requirement 6: Eligible to Receive Federal Grants

## Option 2

A coalition that **partners with an organization that** is serving as the legal entity (i.e. fiscal agent).



## Evidence you must provide:

- Check the box for Option 2
- Complete and sign **Attachment 3 Statement of Legal Eligibility**
- Upload a **signed MOU\*** between the coalition and the fiscal agent
- Name the file: “**Attachment 3\_Statement of Legal Eligibility**” and upload both documents as a PDF to Grants.gov

# Memorandum of Understanding (MOU)

A strong MOU clearly outlines the responsibilities of the coalition and the legal applicant

- ☐ Coalition is partnering with an outside organization to serve as the legal applicant on its behalf.

**OR**

- ☐ Coalition exists within another organization that is eligible to receive federal funding.

- MOU **must** be dated between January 2021 and the application due date.
- **Appendix D contains a sample template you can tailor for local use**



# Requirement 7: Support from non-Federal Sources

Must show a **dollar-for-dollar** match from non-Federal sources **equaling amount of request from the Federal Government**

- **Cash** (e.g., shared salary/benefit expenses for paid staff)
- **In-kind/donated** (e.g., office/meeting space, paper, copying services)
- Must **account for every matched dollar** to the Government

Complete **SF-424** Section 18b and **SF-424A** and describe in the **Budget Narrative**

**DFC Year 1-6: 100% Match**

**DFC Year 7-8: 125% Match**

**DFC Year 9-10: 150% Match**

**Note:** Applicants serving **American Indian/Alaska Native** communities with representation that includes at least one **American Indian/Alaska Native** member may include Bureau of Indian Affairs or Indian Health Service Federal funds as match

# Requirement 8: Federal Request

- Applicant **must** not request more than **\$125,000** in Federal funds per year
  - Make sure **budget calculations are correct** and **do not exceed** \$125,000 for your Federal request

Complete **SF-424** Section 18a and **SF-424A** and describe in the **Budget Narrative**

OMB Number: 4040-0004  
Expiration Date: 12/31/2022

Application for Federal Assistance SF-424

<b>* 1. Type of Submission:</b> <input type="checkbox"/> Preapplication <input type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application		<b>* 2. Type of Application:</b> <input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision		<b>* If Revision, select appropriate letter(s):</b> <input type="text"/> <b>* Other (Specify):</b> <input type="text"/>
<b>* 3. Date Received:</b> <input type="text"/>		<b>4. Applicant Identifier:</b> <input type="text"/>		
<b>5a. Federal Entity Identifier:</b> <input type="text"/>		<b>5b. Federal Award Identifier:</b> <input type="text"/>		
<b>State Use Only:</b>				
<b>6. Date Received by State:</b> <input type="text"/>		<b>7. State Application Identifier:</b> <input type="text"/>		
<b>8. APPLICANT INFORMATION:</b>				
<b>* a. Legal Name:</b> <input type="text"/>				
<b>* b. Employer/Taxpayer Identification Number (EIN/TIN):</b> <input type="text"/>		<b>* c. Organizational DUNS:</b> <input type="text"/>		
<b>d. Address:</b>				
<b>* Street1:</b> <input type="text"/>				
<b>Street2:</b> <input type="text"/>				
<b>* City:</b> <input type="text"/>				
<b>County/Parish:</b> <input type="text"/>				
<b>* State:</b> <input type="text"/>				
<b>Province:</b> <input type="text"/>				
<b>* Country:</b> <input type="text"/> USA: UNITED STATES				
<b>* Zip / Postal Code:</b> <input type="text"/>				
<b>e. Organizational Unit:</b>				
<b>Department Name:</b> <input type="text"/>		<b>Division Name:</b> <input type="text"/>		
<b>f. Name and contact information of person to be contacted on matters involving this application:</b>				
<b>Prefix:</b> <input type="text"/>		<b>* First Name:</b> <input type="text"/>		
<b>Middle Name:</b> <input type="text"/>				
<b>* Last Name:</b> <input type="text"/>				
<b>Suffix:</b> <input type="text"/>				
<b>Title:</b> <input type="text"/>				
<b>Organizational Affiliation:</b> <input type="text"/>				
<b>* Telephone Number:</b> <input type="text"/>		<b>Fax Number:</b> <input type="text"/>		
<b>* Email:</b> <input type="text"/>				

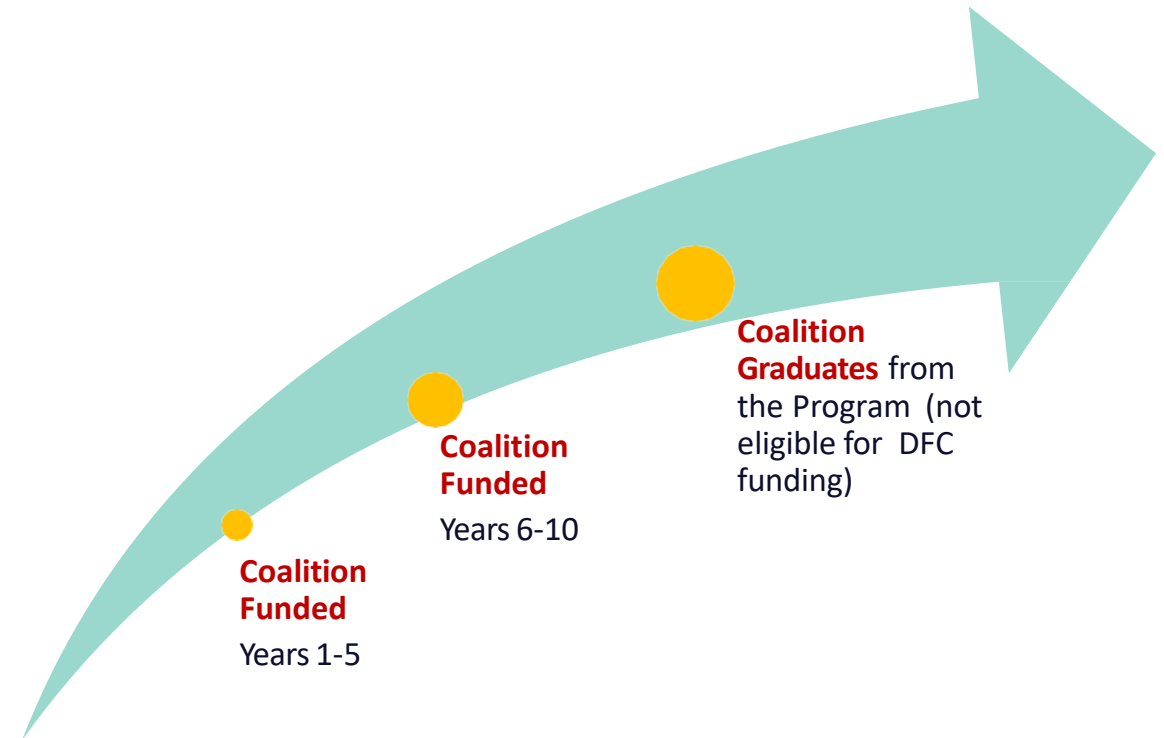
# Requirement 9: Zip Code Overlap

- Two coalitions may not serve the same community **unless both have clearly demonstrated a plan for collaboration** and each coalition has independently met the eligibility requirements
  - Zip codes serve as the method for identifying potential overlaps
  - Applicant must indicate the zip code(s) that overlap and discuss the plan for collaboration.
  - If no overlap exists, please indicate this in Attachment 4 Question 8 on the General Applicant Information form
  - Visit <https://www.cdc.gov/drugoverdose/drug-free-communities/coalitions.html> for a list of FY 2021-funded coalitions.

Complete **Attachment 4. General Applicant Information Form-Q8** and if overlap exists, upload **Letter(s) of Mutual Cooperation**.

# Requirement 10: Assurance of 10 Year Funding Limit

- Indicates an understanding that a coalition cannot receive more than 10-years of DFC funding.
- Complete Attachment 2: Assurance of 10-year funding limit
- The Coalition Representative and the Legal Applicant/Grant Recipient must sign the document.
  - Note: Cannot be the same person



**Name the file: “Attachment 2\_Assurance of 10 Year Funding Limit” and upload as a PDF to [grants.gov](https://grants.gov)**

# Note about 10-year Funding Limit

- The 10-year funding limit applies to coalitions,
- The proposed new, unique, and distinct coalition must have:
  - **Different** leadership & sector representatives
  - Respond to **newly identified community needs**
  - Propose a **new name, mission statement**, and **new 12-month Action Plan**
- Coalitions that received funding for the first grant period (5 years) are eligible to apply for an additional 5 years of funding.



# Attachment 4: General Applicant Information Form

- The General Applicant Information Form provides critical contact information and demographic information about your coalition and community.
- Provide responses in the right column on the table provided in Attachment 4.
- Allows the applicant to indicate that the coalition meets several statutory eligibility requirements,
- Name the file “**Attachment 4\_General Applicant Information**” and upload as a PDF to Grants.gov.



# Attachment 5: Congressional Notification

- If the application is funded, this information will be shared with members of Congress and the media and may be posted to the DFC website.
- The “Project Description” cannot be more than 35 lines & cannot exceed 1 page in length.
- Use the template exactly as provided; include all the information requested.
- Name the file: “**Attachment 5\_Congressional Notification**” and upload as a PDF to Grants.gov.

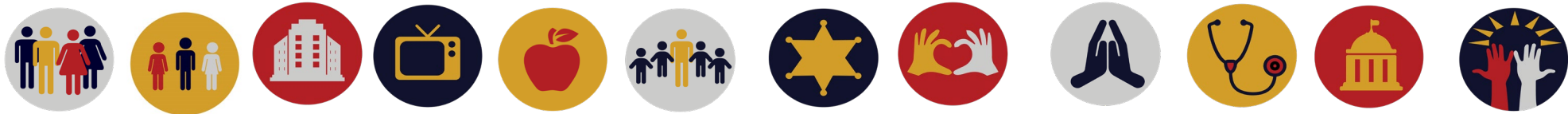


# Helpful Tips:

- Review the attachments and appendices carefully and make sure to include all of the required information
- Please note who is required to sign the forms:
  - CIA: Coalition representative and the sector representative
  - MOU: Coalition representative and the legal applicant
    - *Cannot be the same person*
- Pay attention to appropriate dates



# Project Narrative



# Format of the Project Narrative

- Format
  - Maximum of 20 pages
  - Font must be 12-point font (It is acceptable to use 10-point font in tables and charts)
  - Single-spaced; 1-inch margins on all pages
  - Number all pages in the project narrative

**Name the file: “Project Narrative” and upload as a PDF to Grants.gov.**



# Layout of the Project Narrative

- The Project Narrative must include all of the following headings (including subheadings):
  - Background
  - Approach
    - Purpose
    - Outcomes
    - Strategies
      - *Collaborations*
      - *Target Populations & Health Disparities*
  - Applicant Evaluation and Performance Measurement Plan
  - Organizational Capacity of Applicants to Implement the Approach, and
  - Work Plan (*i.e. the 12-month Action Plan*)



# Content of the Project Narrative

- Pay attention to the Funding Opportunity Description and the Application and Submission sections when developing your project narrative.
- Refer to the following resources:
  - Strategic Prevention Framework
    - <https://www.samhsa.gov/sites/default/files/20190620-samhsastrategic-prevention-framework-guide.pdf>
  - Seven Strategies for Community Level Change
    - <http://www.cadca.org/resources/coalition-impact-environmental-prevention-strategies>
  - DFC Framework (Table 1) & Evidence-Based Resources (Appendix B)
- Project Narrative must be succinct, self-explanatory, and read like a story of your community. Watch your page count and allocate pages wisely.



# Background & Approach

## *Background:*

- Defines the nature and scope of the problem in the community, including the risk factors and local conditions that are driving youth substance use.
- Applicants should include data to demonstrate how the chosen substances have contributed to problems among youth in the community.

## *Approach:*

- Purpose: Summarizes how their application addresses youth substance use in their communities, including the **mission of the coalition** as it relates to the prevention of youth substance use.

**Maximum Score: 50 points**



# Background & Approach Cont'd

## *Outcomes:*

- Aligns the longer-term goals with the activities and strategies outlined in the DFC Framework.

## *Strategies and Activities:*

- Proposes a detailed **12-month action plan**
  - provides a comprehensive approach to prevent youth substance use
  - uses the seven strategies for community level change
  - **identifies at least 2 substances of focus**
  - addresses both program goals
  - includes SMART objectives

**Maximum Score: 50 points**



# 12 Month Detailed Workplan Example

**DFC Goal One: Establish and strengthen collaboration among community stakeholders and organizations to address youth substance use.**

**Objective 1:** Provide a SMART objective

Strategy 1: Provide specific strategy

Activity	Who is Responsible?	By When?

Strategy 2: Provide specific strategy

Activity	Who is Responsible?	By When?

**DFC Goal Two: Reduce substance use and misuse among youth and, over time, reduce substance use and misuse among adults by addressing the factors in a community that increases the risk of substance use and misuse and promoting the factors that minimize the risk of substance use.**

**Objective 2:** Provide a SMART objective

Strategy 1: Provide specific strategy



# Background & Approach Cont'd

## *Collaborations:*

- Describes the collaboration with other organizations, leaders, and key partners who have a role in conducting the proposed activities and achieving the project goals.

## *Target Populations and Health Disparities:*

- Defines the population of focus and rationale for selection. Addresses health disparities and promotes health equity, including populations at risk and geographic areas served.
- Identify the ZIP Codes covered and if any **ZIP Code Overlap** is present

**Maximum Score: 50 points**



# Evaluation & Performance Measurement

- Describes how the coalition will **participate in the DFC National Cross-Site Evaluation** and collect data on youth alcohol, tobacco, marijuana, and/or prescription drug use for the four core measures.
- Describes how the coalition will monitor and evaluate the success of the goals and objectives of the workplan (i.e., 12-Month Action Plan).
- Describes how the coalition will disseminate the information to all segments of the community, including a description of the data that will be produced using these NOFO funds.

**Maximum score: 25 points**



# Organizational Capacity to Implement the Approach

- Demonstrates the capacity of the organization to manage the programmatic and fiscal requirements of the grant.
- Identifies the **key personnel** and their roles and responsibilities.
- Describes the role of the community coalition, including how the 12 sector representatives have been involved in achieving the coalition's goals.
- Describes how the coalition recruits and retains members, especially youth representation.

**Maximum Score: 25 points**



# Key Personnel Definitions

- **Authorized Organization Representative (AOR):** The AOR is the representative of the applicant/recipient organization with authority to act on the organization's behalf in matters related to the award and administration of grants.
- This individual agrees the organization will assume the obligations imposed by applicable Federal statutes and regulations and other terms and conditions of the award, including any assurances, if a grant is awarded.
- This person demonstrates the capacity of the organization to manage the programmatic and fiscal requirements of the grant.
- **This person must be an employee of the recipient organization.**



# Key Personnel Definitions

- **Program Director/Principal Investigator (PD/PI):** The PD/PI is the person who provides programmatic oversight of the grant and is accountable to officials of the recipient organization. **The PD/PI must be an employee** of the recipient organization and cannot be the same person as the AOR.
- **Project Coordinator:** The Project Coordinator manages the work of the coalition and program activities, including training, coalition communication, data collection, and information dissemination. The PD/PI and the Project Coordinator can be the same person.
- Applicants do not need all key personnel in place at the time of submission.
- Applicant **must** upload Key Personnel Resumes or Position Description.

**Name the file: “Key Personnel Resumes or Position Description” and upload as a PDF to Grants.gov.**

# Budget & Budget Narrative



# Budget

- All applicants need to complete the **SF-424** and **SF-424A**
- Applicants must **not request more than \$125,000** in federal funds per year. Include **matching funds at 100%** of your federal dollar request
- Grants.gov has instructions on how to download and complete these forms:  
<https://www.grants.gov/web/grants/forms/sf-424-family.html>
- The link to the Budget forms is found in the Phase II review section



# Budget Narrative

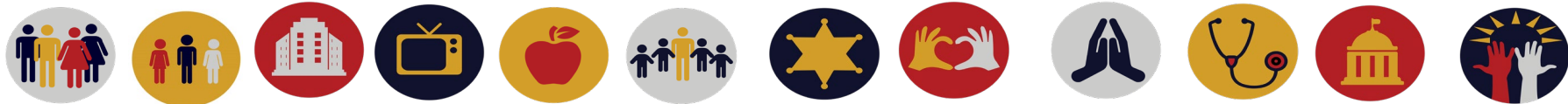
- Required, though not scored.
- Must be itemized.
- Proposed budget is reasonable and consistent with the purpose, objectives, and program strategy outlined in the project narrative.
- A copy of the indirect cost-rate agreement is required only for those requesting indirect costs in the budget.
- CDC's budget preparation guidelines can be found at:  
[www.cdc.gov/grants/documents/Budget-Preparation-Guidance.pdf](http://www.cdc.gov/grants/documents/Budget-Preparation-Guidance.pdf)
- Name these files "Budget Narrative" and "Indirect Cost Rate" and upload it as a PDF file at [www.grants.gov](http://www.grants.gov).



# In-Kind Support Definition

- Examples of **ACCEPTABLE** in-kind support/match include the following (not limited to):
  - The value of goods and services donated to the operation of the DFC coalition, including but not limited to office space, volunteer secretarial services, pro bono accounting services, and other volunteer services to support the coalition's work. Other volunteer services can include youth hours worked on events.
  - In-kind support can include training programs sponsored by other coalitions or partners for the community.
- Examples of **UNACCEPTABLE** in-kind support/match include the following (not limited to):
  - Federal funds, including those passed through a state or local government, (e.g., CARA, STOP, etc.)
  - All in-kind/match must follow federal cost principles (see Administrative and National Policy Requirements Section within the NOFO). In-kind/match support must align with allowable expenses under the DFC program.

# Additional Documentation



# CDC Risk Questionnaire

- The CDC Risk Questionnaire is required for all applications and should be completed by the legal applicant and can be found at:  
<https://www.cdc.gov/grants/documents/PPMR-G-CDC-Risk-Questionnaire.pdf>
- Applicants must include all supporting documentation for the Risk Questionnaire in the application package.
  - It is acceptable to include a PDF document with a link to the policies requested as long as individuals outside of your organization can access the policies through the link.
- Details are located in the Application and Submission Information section

Name this file “CDC Risk Questionnaire” and upload it as a PDF file at [www.grants.gov](http://www.grants.gov)

# Report on Programmatic Budgetary and Commitment Overlap: Review and Selection Process

- Applicants are responsible for reporting if this application will result in programmatic, budgetary, or commitment overlap with another application or award (i.e. grant, cooperative agreement, or contract) submitted to another funding source in the same fiscal year.
- This is not a pre-existing CDC document, but one that you develop on your own.
- For more information on what to include in this report, please review the Application and Submission Information section

Name this file “Report on Programmatic, Budgetary, and Commitment Overlap” and upload it as a PDF file at [www.grants.gov](http://www.grants.gov)

# Table of Contents

- Provide a detailed table of contents for the entire submission package that include all of the documents in the application and headings in the “Project Narrative” section.
- Does **not** count toward maximum 20-page limit.



Name this file “Table of Contents” and upload it as a PDF file at [www.grants.gov](http://www.grants.gov)

# Project Abstract Summary

- Required, though not scored.
- Paints a picture of the community, providing an opportunity to educate reviewers about the community.
- No more than 1-page in length.
- Does not count toward the maximum page limit.
- Applicants must enter the summary in the “Project Abstract Summary” text box at [www.grants.gov](http://www.grants.gov)



# Disclosure of Lobbying Activities – SF-LLL

- You are still required to complete this form even if you do not have a lobbyist.
- If an applicant does not have a lobbyist, then an applicant is still required to complete Sections 4, 6, 10a, 10b, and 11 of the Disclosure of Lobbying Activities form.
- The applicant may enter “N/A” for the required fields in Sections 10a and 10b in order to complete the form and be able to submit it with your application package.
- See also: Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC recipients



# Helpful Information for Submitting a DFC Grant Application



# Electronic Submissions

- Must receive applications by 11:59 pm EST on **April 11, 2022.**
- Start the online application submission **early**
  - DO NOT wait until the day the application is due -recommend you submit at least 72 hours prior to the deadline
- Three Registration Processes (Required Registrations Section in the NOFO):
  - Unique Entity Identifier (UEI) from the Data Universal Numbering System (DUNS)
  - System for Award Management (SAM)
  - Grants.gov



# Tips for Electronic Submissions

- Read and review the Required Registrations section within the NOFO, which describe all three required registration processes.
- SAVE confirmations. If you do not receive a confirmation, follow-up immediately with system-specific contacts.
- All documentation about applications will go to the person listed as the “Authorized Representative”
  - Ensure that this is a person who has regular contact with the coalition



# Tips for Electronic Submissions

- No additional information may be added to an application after the application deadline
- Application cannot be faxed, hand-delivered, or emailed.
- If you qualify for and have been authorized to submit a paper copy due to technical difficulties encountered at Grants.gov, follow the instructions provided by CDC's Office of Grants Services.



**If you have additional questions  
about the DFC NOFO, please contact:**

**[DFC\\_NOFO@cdc.gov](mailto:DFC_NOFO@cdc.gov)**

**Or visit our webpage  
[www.cdc.gov/drugoverdose/drug-free-communities/index.html](http://www.cdc.gov/drugoverdose/drug-free-communities/index.html)**

**QUESTIONS?**  
**Please submit in the**  
**Q&A box**

