

Commonwealth of Massachusetts
Executive Office of Public Safety and Security
Office of Grants & Research
*Student, Teachers, and Officers Preventing
(STOP) School Violence Program*
Attachment A
Application Template for STOP Grant Opportunity

Section I. Applicant Information

Name of Public School District/Charter School: _____

Funding Requested: \$ _____

Name of Superintendent or Executive Director: _____
(First and Last Name)

Superintendent or Executive Director Phone: _____

Email Address: _____

Public School District/Charter School Mailing Address:

Street: _____ **City:** _____ **Zip Code:** _____

County: _____ **Phone:** _____

Grant Contact Name: _____ **Title:** _____

(Note: The person designated as the *Grant Contact* shall serve as the project's point person and be responsible for receiving and responding to EOPSS' project related requests)

Grant Contact Mailing Address:

Same as Above ☐

Street: _____ **City:** _____ **Zip Code:** _____

County: _____ **Phone:** _____

E-mail: _____

Fiscal Point of Contact for Grant: Name: _____ **Title:** _____

Fiscal Contact Mailing Address:

Same as Above ☐

Street: _____ **City:** _____ **Zip Code:** _____

County: _____ **Phone:** _____

E-mail: _____

Signature Page

The following must be completed and signed by both Authorizing Officials for the Municipality where the school resides to benefit from the grant and Public School District/Charter School submitting this application.

The application has been prepared after consultation with individuals not limited to law enforcement officers (such as school violence researchers, licensed mental health professionals, social workers, teachers, principals, and other school personnel) to ensure that the improvements to be funded under the grant are-

- (A) consistent with a comprehensive approach to preventing school violence; and
- (B) individualized to the needs of each school at which those improvements are to be made.

By signing below, the applicant assures to maintain and report such data, records, and information (programmatic and financial) as EOPSS OGR may reasonably require.

Municipal Chief Executive Officer

As the Chief Executive Officer of this City or Town, I am supporting the School Department's request for funds for a STOP School Violence Program grant from the Executive Office of Public Safety and Security. I have reviewed and approve the content contained in this application being submitted for consideration of a grant award.

Name of City/Town _____

Authorizing Official Name-Printed _____ Date _____

Signature _____

The following must be completed and signed by the School Superintendent/Executive Director on behalf of the Public School District/Charter School submitting this application.

School Superintendent or Executive Director

As the Superintendent/Executive Director for this Public School District/Charter School, I am requesting funds for a STOP School Violence grant award from the Executive Office of Public Safety and Security. I have reviewed and approve the content contained in this application being submitted for consideration of funding.

Name of Superintendent or Executive Director _____

Superintendent/Executive Director Name-Printed _____ Date _____

Signature _____

Please note that unsigned applications cannot be scored and will not be eligible for an award.

Project Summary: Provide a brief summary of the issue, program design, program implementation, and plan for data collection (250 -500 characters *maximum*)

Section II. Narrative Template

1. Needs Assessment

Use the space provided to 1) Provide a description of the school district/charter identified to benefit from this application and include the population of the school building(s) that will receive the funding and how each building is used by students, faculty and staff, 2) Describe in detail the current school district's unmet safety and security needs, 3) The sources or methods used for assessing the problem should also be described, 4) Further explain why such school safety and security needs stated have not been previously met to justify grant funds are needed.

Section II. Narrative Template

1. Project Description

Use the space provided to describe:

(A) plan to develop and conduct individual and school threat assessments in target schools identified in the application

(B) plan to collect and report certain data elements identified from completed individual threat assessments

(C) establishment of crisis intervention teams that use evidence-based strategies and are based on cooperative partnerships

(D) expected benefits/outcomes for school district and/or community and any other info that may be helpful to justify the funding request.

Section II. Narrative Template, Continued

3. Implementation Plan, Timeline and Person Responsible

Complete the template grid provided by identifying the necessary steps to be implemented over the project period for proposed grant activities.

| List of Major Tasks/ Activities | Anticipated Date for Receipt of Goods/Services | Staff Responsible |
|---------------------------------|--|-------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Section IV. Proposal Check List

Application Elements and Required Attachments:

Attachment A: Completed Application Template signed and dated (this form as a PDF).

Attachment B: Budget Excel Worksheet (Summary and Detail sheets as Excel document).

Attachment C: OGR Risk Assessment Form

Applicant Information Form: https://massgov.formstack.com/forms/hls_stop_school_violence

Letter from local Police Chief

Please submit the above documents by email no later than 4:00pm on Friday, January 13, 2023 to:

benjamin.podsiadlo@mass.gov

If you have any questions regarding this application, please email: benjamin.podsiadlo@mass.gov