

FY24 Application eGrants Step-by-Step Guide

For FY24, all aspects of MOVA grants management will continue to occur over the <u>electronic</u> <u>grants management (eGrants) system</u>. This guide will walk through each step necessary to submit an application in the system for the FY24 VOCA & State Victim Assistance Funding and SAFEPLAN applications. Although differences between the two applications will be detailed below, the process remains mostly the same.

More information about the FY24 application process and requirements – including the Request for Grant Applications (RGA) documents, can be found on C<u>OMMBUYS</u>, and additional training, videos and guides for eGrants can be found on <u>MOVA's eGrants webpage</u>.

Access to eGrants

The Website

Use <u>this link</u> to access the MOVA eGrants system. Additional technical information about logging onto the eGrants system can be found in the eGrants Subrecipient Manual on <u>MOVA's</u> <u>eGrants webpage</u>.



User Roles

Only the following users have the permissions to initiate, fill out, and submit an application to MOVA:

- Agency Administrator
- Application Submitter
- Authorized Representative

Before embarking on the application process, please ensure that the individuals working on the application are assigned to one or more of these roles.

Initiating an Application

Once logged into the site, the user will be taken to their Dashboard, which functions as a home page. On the Dashboard, there will be a section titled My Opportunities where the application options can be found. Remember that only one application will be submitted per award per agency. If you have historically received multiple VOCA awards, combine the request into one application.

ly Task	S			Initiate	Related Document	My Opportu	nities		
> Filter					1	Name	Provider	Availability	Description
						SAFEPLAN Application	Massachusetts Office for	10/1/2020 12:00:00 AM -	SAFEPLAN - Application
Y MV I	asks				<u> </u>	FY23	Vicum Assistance	10/1/2025 12:00:00 AM	
Name	Organization	Status	Due Date	Document Type	Status Date	SAFEPLAN Application FY24	Massachusetts Office for Victim Assistance	10/1/2022 12:00:00 AM - 10/1/2022 12:00:00 AM - 10/1/2024 12:00:00 AM	SAFEPLAN - Application
Name APR-ER-2023- MARV-104	Organization Marvel	Status Expenditure Report in Process	Due Date	Document Type Expenditures	Status Date 10/19/2022 11:36:53 AM	SAFEPLAN Application FY24 VOCA Application FY23	Massachusetts Office for Victim Assistance Massachusetts Office for Victim Assistance	10/1/2023 12:00:00 AM - 10/1/2022 12:00:00 AM - 10/1/2024 12:00:00 AM - 10/1/2021 12:00:00 AM - 10/1/2023 12:00:00 AM	SAFEPLAN - Application

Select the link for the application that you are applying to and click Proceed in the pop up box. For example, the SAFEPLAN pop up will look like the following:

SAFEPLAN Ap	plication FY24	≅ ×
Provided By:	Massachusetts Office for Victim Assistance	
Provided To:	Marvel	~
Application Availability Dates:	10/1/2022 12:00:00 AM - 10/1/2024 12:00:00 AM	
Due Date:	N/A	
Description: SAFEPLAN grants support SAFEP abuse.	LAN services for victims of domestic violence, sexual assault, and stalking, who are seeking prot	ection from
	Proceed	ancel

The FY24 Application

Document Landing Page

Once initiated, the user will then be taken to the Document Landing Page, which functions as the home page for the application.



Here, there are a variety of categories. The two most important to note are:

- Document Name—this will be the name of the application and future award. Make note of this name and use it with any communications with MOVA or Agate, the website developer. The document name in this example is SAFEPLAN-2024-MARV-6.
- Document Status—this indicates the "status" of the application and future award. When filling out the application, the status will remain as Application in Process. Once submitted, the status will change to Application in Review, which indicates that MOVA has received the submission.

Application Forms

There are 5 forms in addition to the budget that MOVA requires for each FY24 application.

For VOCA, the forms are:

- Section I
- Section II
- Organizational Questionnaire
- Prioritization Form
- Required Uploads

For SAFEPLAN, the forms are the same with the exception of the Court Coverage Agreement form replacing the Prioritization Form.

Although these can be filled out in any order, this guide will review each of the forms in the order in which they appear in the application.

Errors

It is important to understand how the eGrants system communicates requirements and errors. After saving or navigating away from a page at any point in the process, an error check may pop up.

~	Home Administration •	Searches • Reports •			Authorized OfficialARM1 -
	SAFEPLAN-2024-MARV-6	Section I			New Note Print Save Last Saved 11/28/2022 9:48 AM
	✓ Forms			✓ Attention	
	SAFEPLAN Application Forms	Instructions 1. Please complete the form below. 2. Required fields are indicated with an *. 3. Select the XAVE button freework to save information.		Agency Legal Name is Agency Information D Agency Information L Agency Information C Agency Information C Agency Information C	required. BA is required. egal Address is required. ity is required.
	Section I			Agency Information 2 Agency Information To Agency Information To	elephone is required.
	Section II	SECTION I		Agency Information w Agency Leadership Fir Agency Leadership I a	st Name is required.
	Organizational Questionnaire	Agency Information		Agency Leadership La Agency Leadership Ma Agency Leadership Ma Agency Leadership Ma	le is required. le is required alling Address is required. formation City is required
	Court Coverage	Agency Information	Agency Leadershij	Agency Leadership Int Agency Leadership Te	formation Zip is required.
	SAFEPLAN Budget Forms	Fill out this section with all the contact information for the program's <u>host agency</u> including the <u>legal name</u> (as it appears on the IRS Form 990), your " dba " name if applicable, and the <u>four digit zip code extension</u> . the Executive Director	h all the contact information for th	Agency Leadership In Agency Leadership In Program Contact First Program Contact Last Program Contact Last	nail is required. Name is a required field. Name is a required field.
	Salary 🔲	Agency's Legal Name* Prefix	First Name*	Program Contact Title Program Contact Mail	is a required field.
	Fringe Benefits	· · ·		 Program Contact Mail field. Program Contact E-m. Fiscal Contact First Na 	ing Address is a required ail is a required field. ame is required.

In the example above, the Agency's Legal Name is required, which is indicated by:

- A red box around the missing information and
- A specific direction in the top right corner of the screen

The user can be taken directly to the error in question by selecting it from the pop up in the right-hand corner. Additionally, the entire section will be labeled with an exclamation point in the left-hand panel if there are any errors on the page. All errors must be resolved before attempting to submit an application.

Section I

Section I asks for relevant Applicant Information, including agency information and contact information. Fill out all of the information and select Save in the top right corner of the page.

The information <u>does *not*</u> automatically save, so it is essential with every page within eGrants that the user frequently saves in order to not lose work. The page is acceptable when a check appears in the box in the panel for the relevant form but requires attention if there is an exclamation point instead.



Section II

Section II has 2 sub-sections for SAFEPLAN and 4 sub-sections for VOCA.

VOCA ONLY: Match Waiver

In this section, indicate whether you will be opting into or out of the blanket match waiver. Depending on what is selected, the application will open budget forms either without match columns or with match columns. See more information about the budget forms below.

Crime Type Served

Estimate the percentage of your funded program's services that will be directed towards the below listed crime types. Percentages in each category can range from 0-100% and the auto-calculated total percentage must equal 100%. Add an additional row for each crime type added under Other Violent Crime and Other Non-Violent Crime.



VOCA ONLY: Specific Underserved Populations Served

This section offers agencies an opportunity to indicate if their program services are designed and intended to serve any of the underserved populations as defined by MOVA. This section is optional.

In part 2A, provide documentation to support your selections in part 2B. In 2B, provide the percentage of your funded program's services that are provided to the underserved victim/survivor populations. If reporting Other, specify the type of crime by typing in the box. If there are multiple of Other populations being reported, use the green + button at the end of the row to add as many rows as you need to report accurately.

Program Narrative

In this section, applicants will complete the respective VOCA or SAFEPLAN narrative questions. More information about the program narrative questions can be found in the VOCA and SAFEPLAN RGAs.

Throughout this form and after all information is complete, please ensure to save using the Save button in the top right corner of the page.

Organizational Questionnaire

Users are to fill out this form with the organizational information relevant to the program. If combining multiple programs under one contract, please come up with a singular, unified name for the Program box in this section.

SAFEPLAN ONLY: Court Coverage Agreement Form

This form is used to verify court coverage under the SAFEPLAN award. At a minimum, one total row is required to complete this form. To view an example, click on the Court Coverage Agreement Example link at the top of the page.

Application Budget Forms Introduction to Budget Forms

In lieu of submitting a budget through a MOVA-provided Excel workbook, all budget information will be input into the MOVA eGrants system. Within the application, there will be a budget section in the left-hand panel where each category and the Budget Summary has a separate form in the system. The examples below are from a VOCA without match and a SAFEPLAN application respectively:

FY24 VOCA Budget Form without Match	าร			
FY24 - Salary	D		SAFEPLAN Budget Forn	ns
FY24 - Fringe	0	8	Salary	C
FY24 - Consultants	0		Fringe Benefits	C
FY24 - Office & Programmatic Supplies	D		Office & Programmatic Supplies	0
FY24 - Equipment	D		Travel	O
FY24 - Travel	D		Other Costs	C
FY24 - Contracts	D	5	Indirect Costs	0
FY24 - Other Costs	D		SAFEPLAN Budget Sum	nmary
FY24 - Indirect Costs	D		Summary of Costs	
FY24 Budget Summary VOCA w/o Match	0			

To fill out the budget request, select the relevant category and start by filling out the information in the first row. Similar to the Excel budgets, a Budget Narrative must accompany each line item. MOVA encourages applicants to <u>fill out each line item first, save the page, and then fill out the Budget Narrative for each line item</u>. Saving the page will insert the requested item's name into the budget narrative section. If an applicant attempts to insert Budget Narrative information *before* saving and before the line item is labeled in the budget narrative section, <u>it will not be saved</u>.

It is essential that the applicant clicks into every budget form (cost category) and saves the page even if no expenses are being requested for that category. Saving the page will insert a checkmark into the box in the side panel. The application cannot be submitted if there are any forms with empty checkboxes or exclamation points, indicating error(s).

More information about each budget category can be found below.

VOCA ONLY: Budget Forms With Match

If an applicant opts out of the match waiver, budget forms will have an additional column at the end of every row titled VOCA match where applicable match dollars should be reported.



Salary

Start by filling out the first question at the top of the page that asks how many hours per week is considered full time at the agency. This number will be used for calculations throughout the salary page, including the number of Full-Time Equivalents (FTEs) below.

How many h	ours per week is full-time at your age	ency?*	37.50	Hours per week
Number of F	ull-Time Equivalent (FTEs)		4.00 FTEs	

Fill out each row with the first staff member's information. Add a row by selecting the green plus sign at the end of the row. Once there is more than one row, rows can be deleted using the red minus sign at the end of the row. Find more information about each of the columns (i.e. Staff Category, Direct or Administration Cost, etc.) in the VOCA and SAFEPLAN RGAs. The example below is pulled from a VOCA with match application:

Personnel - Salary										
Instructions: Fill out the f provided.	following information for y	our requested staffing	. Full-time equivale	nts (FTEs) will be a	auto-calculated as a tota	I for the funding requ	lest and for each st	taff member using the inform	ation	
How many hours per we	ek is full-time at your ager	ncy?* 37.50 H	ours per week							
Number of Full-Time Equ	uivalent (FTEs)	4.00 FTEs								
Employee Name	Staff Category	Title	# of VOCA hours per week	# Weeks on VOCA Project	VOCA Cost	VOCA Match	Total Salary Cost	Direct or Administration Cost	FTE	
Joker	Admin Staff: Ag 🗸	Boss	37.50	52.00	\$ 1,000,000.0	\$	\$1,000,000.00	Administration 🗸	1.00	+ -
Employee Name	Staff Category	Title	# of VOCA hours per week	# Weeks on VOCA Project	VOCA Cost	VOCA Match	Total Salary Cost	Direct or Administration Cost	FTE	
Bane	Direct Staff: Clii 🗸	Head Therapist	37.50	52.00	\$ 20,000.00	\$	\$20,000.00	Direct 🗸	1.00	1
Employee Name	Staff Category	Title	# of VOCA hours per week	# Weeks on VOCA Project	VOCA Cost	VOCA Match	Total Salary Cost	Direct or Administration Cost	FTE	
Poison Ivy	Admin Staff: Fis 🗸	Accountant	37.50	52.00	\$ 70,000.00	\$	\$70,000.00	Administration 🗸	1.00	1
Employee Name	Staff Category	Title	# of VOCA hours per week	# Weeks on VOCA Project	VOCA Cost	VOCA Match	Total Salary Cost	Direct or Administration Cost	FTE	
Harley Quin	Admin Staff: Pr 🗸	Second Boss	37.50	52.00	\$ 90,000.00	\$	\$90,000.00	Direct 🗸	1.00	* -
				Total:	\$1,180,000.00	\$0.00	\$1,180,000.00			

Fill out each line item *first* and then save the page. Once saved, each employee's name will pop up in the Budget Narrative section. Only once the employee's name is auto-populated in the Budget Narrative section should an applicant fill out the rest of the row. If an applicant <u>attempts to fill out the Budget Narrative *before* the employee's name has been auto-populated, that information will not be saved.</u>

This shows an example of when the Budget Narrative is not ready to be filled out:

Budget Narrative for Salary			
Employee	Total Employed Hours	Employee's <i>Actual</i> Annual	Other Funding Support X Hours of position (Do not include match, be specific when identifying sources).
Name	at Agency per week	Salary at Agency	

This shows an example of when the Budget Narrative *is* ready to be filled out:

Budget Nar	rrative for Salary			
Empl Joker	oyee Name	Total Employed Hours at Agency per week	Employee's <i>Actual</i> Annual Salary at Agency \$	Other Funding Support X Hours of position (Do not include match, be specific when identifying sources).
Empl Bane	oyee Name	Total Employed Hours at Agency per week	Employee's <i>Actual</i> Annual Salary at Agency	Other Funding Support X Hours of position (Do not include match, be specific when identifying sources).
Empl Poison Ivy	oyee Name	Total Employed Hours at Agency per week	Employee's <i>Actual</i> Annual Salary at Agency \$	Other Funding Support X Hours of position (Do not include match, be specific when identifying sources).
Empl Harley Quin	oyee Name	Total Employed Hours at Agency per week	Employee's <i>Actual</i> Annual Salary at Agency	Other Funding Support X Hours of position (Do not include match, be specific when identifying sources).

Fringe

Similar to the formerly used Excel budgets, eGrants will auto-populate each staff member's name and base salary from the Salary page.



If any employee auto-populates whom will not have any fringe VOCA reimbursement (or match if relevant), the employee can be deleted using the red minus sign to the right of that employee's name.

Fill out the relevant fringe information. An employee's fringe request cannot exceed that of the base amount (VOCA reimbursement from the salary page) multiplied by the fringe rate.

Similar to the Salary page and all budget pages moving forward, fill out the line items first, save the page, and then fill out the Budget Narrative.

Other Budget Pages

Fill out all of the other budget pages with any applicable expenses.

Remember to save all budget pages, even if no dollars are being requested for a particular category.

Finally, for the easiest use of the system, make sure to fill out the line items first, save the page, and fill out the Budget Narrative last only once each line item's name pops up in the Budget Narrative section.

FY23 Budget Summary

The Budget Summary will auto-calculate. Review the Budget Summary for accuracy and save the page once verified.

VOCA ONLY: Prioritization Form

All VOCA applicants—with the exception of pass-through agencies—will be required to fill out the Prioritization Form in eGrants. Select Yes from the pass-through question if you are a passthrough agency but leave it blank if you are not. If you are unsure if you are a pass-through agency, reach out to the Procurement Team Leader.

The form will auto-populate the names and VOCA dollar commitment from each line item in the funding request. MOVA recommends that agencies finalize the funding request before moving on to the Prioritization Form.

For each line item, agencies will be responsible for prioritizing the costs against one another, with rank #1 being the highest priority. Each line item requires a justification, including if there are any other possible funding sources for that line item. Each ranking number can only be used once.

Required Uploads

Contractor Authorized Signatory Listing (CASL) Form

Click on the link titled Authorized Signatory Information to download the Contractor Authorized Signatory Listing (CASL) form. Fill out and upload the form into upload section 1D. Then, type in the information from the CASL form in sections 1a through 1c. Please note that the information typed into eGrants must match the information in the signed and uploaded form or MOVA will be unable to accept.

Contractor Authorized Signatory Listing (CASL) Form		
The CASL is a Commonwealth form which identifies the individual(s) authorized to sign con on application must be identified on this form. State agencies are also required to submit t Chief Fiscal Officer, Corporate Clerk or Legal Counsel). Notarization is not required, and ele	racts for the organization. Agencies may authorize iis form. The form is to be signed and completed by tronic signatures are acceptable.	multiple signatories for the organization. The authorized signatory ı an authorized individual (i.e., President, Chief Executive Officer,
1a. Authorized Signatory Name (First and Last) $ m \star$ 1b. Authorized Signatory Title $ m \star$	1c. Authorized Signatory Email Address *	1d. Authorized Signatory Upload *
Joker Boss	JokerRules@aol.com	Select Drag Files Here
		Testing.docx 11.63 KB X

Optional Upload

VOCA pass-through agencies are required to use the Optional Upload section to upload all subrecipient funding requests. Use the green plus sign to create as many rows as necessary.

The Optional Upload section may also be used to upload additional documentation that may support the application.

Submitting the Application

Once the applicant is satisfied with all of the information in the application and all of the forms have been saved, scroll to the bottom of the left-hand panel to find the Status Options. There are two options—Application Cancelled and Application Submitted.



If Application Cancelled is selected and confirmed, the application will officially be cancelled and all information will be deleted.

To submit the application, select Application Submitted. If there are any issues with the application, a box will pop up and detail the areas that require attention. For example:

bocument		
elow is the status of each	form. Select the form name to navigate and make changes to any of the forms	
Show forms that I can	not adjust	
Show forms that I can	not adjust Status	May Prevent Status Change

If the application is eligible for submission, a box will pop up with the following:



Feel free to enter any relevant notes and select OK to submit the application to MOVA. Once submitted, the applicant will be taken back to the Document Landing Page and the Document Status will be Application in Review. This confirms that the application has been submitted to MOVA.

	ent Lar	nding P	age					
Template FY24 SAFEPLAN			Instance SAFEPLAN Applicat	tion FY24		Process Application		
Document Name SAFEPLAN-2024-MAR	V-1		Document Status Application in Revie	ew				
Organization Marvel			Your Role Agency Administra	tor		Period Date 10/1/2021 12:00:00 A 10/1/2022 12:00:00 A	M	
O —	-0-		-0-	-0-	-0-	-0-	-0-	-0
lication in Process	Application odifications Required	Application in Review	Application Not Recommended for Funding	Application Recommended for Funding	Pre-Contract Adjustments Required	Pre-Contract Adjustments Review	Contract Pending Executive Director Signature	Contract Executed

Conclusion

By following all of the above steps, applicants can successfully use the MOVA eGrants system to submit their FY24 VOCA & State Victim Assistance Funding or SAFEPLAN applications.

Timeline

The FY24 VOCA & State Victim Assistance Funding and SAFEPLAN applications will be available on eGrants beginning December 5, 2022 and will be due to MOVA no later than February 15, 2023 at 12:00 p.m. On December 7, 2022, MOVA will be hosting an optional eGrants: Practice to Perfect session that will walk through the application on eGrants, which will be recorded and posted on MOVA's eGrants webpage. On December 12th, MOVA will be hosting an optional FY24 informational webinar (bidders' conference), which will be recorded and posted on the <u>Grant Funding Opportunity webpage</u>. More information regarding the timeline can be found in the Request for Grant Applications (RGA).

Resources

This document serves as a step-by-step guide and provides best practices for successfully submitting a FY24 VOCA & State Victim Assistance Funding or SAFEPLAN application within the MOVA eGrants system.

More information about these Requests for Grant Applications (RGAs) can be found:

- Grant Funding Opportunity webpage
- COMMBUYS

More information about the MOVA eGrants system can be found:

- MOVA's eGrants webpage
- eGrants Subrecipient Manual

All questions regarding the FY24 VOCA & State Victim Assistance Funding and SAFEPLAN applications should be directed to Procurement Team Lead, Ashlee Renich-Malek, at <u>Ashlee.Renich-Malek@mass.gov</u>.

Disclaimer: All screenshots used in this guide are taken from MOVA's test website. The live website may appear different, but all functionality and instructions still apply.