

Completing Remaining Core Services Applications Sections

This training video reviews the remaining sections not covered under the General Application Sections training video. This training covers Needs Statement; Project Design & Implementation; and Other Required Sections only.

View Guidelines	Applicant Information	음* Manage a
Application Forms NSP Core Services Draft on May 28, 2025	NATIONAL CHILDRENS ALLIANCE INC 921 PENNSYLVANIA AVE SE SUITE 313, WASHINGTON, DC, 2003-2141, US 63-1044781	underourfeet@gmail.com
	FORM QUESTIONS Complete the required fields below. Accepting applications until Aug 8, 2025 11:59 PM Organization Information Pre Award Checklist Needs Statement Project Design & Implementa	Capabilities and Competenci
	Is the CAC address for this application the same as the address listed in the Applicant Information above?# The CAC address refers to the place of performance of the grant award.	
	+ Contacts	

2 Respond to Abstract

3

	Complete the required fields below. Accepting applications until Aug 8, 2025 11:59 PM
	Organization Information Pre Award Checklist Needs Statement Project Design & Implementa Capabilities and Competenci
	ABSTRACT Applicants must provide a project abstract, which should include the following information (400 word max):
	Purpose of the proposed project Project activities to be performed Expected outcomes, deliverables, or milestones of the proposed project Service Area Intended beneficiary(ies) of the proposed project
	Abstract* Example Proposal Abstract Template: The [insert Entity name] proposes to implement the [insert project name]. The purpose is to in the [insert service area]. Project activities include Expected outcomes include:,are the intended beneficiaries of the project.
	Description of Issue/Needs Statement
Saved	Applicants must describe the current core service need that the scope of work will address and how this need will be met with grant funds. Applicants must also adequately describe how funding loss threatens the ability to maintain and thus meet the current core service need described.*
	©2025 YourCause - GrantsConnect (2.121.2) (gimbbj) <u>Terms of Ser</u>

Respond to: "Applicants must describe the current core service need that the scope of work will address and how this need will be met with grant funds. Applicants must also adequately describe how funding loss threatens the ability to maintain and thus meet the current core service need described."

- Dumose of the proposed project	
 Project activities to be performed 	
 Expected outcomes, deliverables, or mil Service Area 	estones of the proposed project
Intended beneficiary(ies) of the proposed	d project
Abstract*	
Example Proposal Abstract Template: The [insert E include Expected outcomes include	intity name] proposes to implement the [insert project name]. The purpose is to in the [insert service area]. Project activities ie:are the intended beneficiaries of the project.
Description of Issue/Needs	Statement
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Description of Issue/Needs Applicants must describe the current core s describertion funding loss threatens the abi	Statement ervice need that the scope of work will address and how this need will be met with grant funds. Applicants must also adequat lify to maintain and thus meet the current core service need described.*
Description of Issue/Needs Applicants must describe the current core s describe flow funding loss threatens the abi	Statement ervice need that the scope of work will address and how this need will be met with grant funds. Applicants must also adequate lity to maintain and thus meet the current core service need described.*
Description of Issue/Needs Applicants must describe the current core s describe now funding loss threatens the abi	Statement ervice need that the scope of work will address and how this need will be met with grant funds. Applicants must also adequate lity to maintain and thus meet the current core service need described.*
Description of Issue/Needs	Statement ervice need that the scope of work will address and how this need will be met with grant funds. Applicants must also adequat lity to maintain and thus meet the current core service need described.*
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Description of Issue/Needs Applicants must describe the current core s describe flow funding loss threatens the ability Funding Loss Documentation*	Statement ervice need that the scope of work will address and how this need will be met with grant funds. Applicants must also adequat lity to maintain and thus meet the current core service need described.*
Description of Issue/Needs Applicants must describe the current core s describenow theoring loss threatens the ability Funding Loss Documentation*	Statement ervice need that the scope of work will address and how this need will be met with grant funds. Applicants must also adequat lity to maintain and thus meet the current core service need described.*

	Service Area Intended beneficiary(ies) of the proposed project
A E: in	bstract* iample Proposal Abstract Template: The [insert Entity name] proposes to implement the [insert project name]. The purpose is to in the [insert service area]. Project activities cludeExpected outcomes include:are the intended beneficiaries of the project.
	Description of Issue/Needs Statement
	Applicants must describe the current core service need that the scope of work will address and how this need will be met with grant funds. Applicants must also adequately describe how funding loss threatens the ability to maintain and thus meet the current core service need described.*
	Funding Loss Documentation*
	Click or dro <u>p files</u> Here to upload Maximum file size: 29MB
	Accepted file types include: pdf, xls, xlsx

5 Respond to: "Describe how the submitted documentation demonstrates funding loss."

Funding Loss Documentation*		
	Click or drop files here to upload	
Acconted file types include: odf. vis. visy	Maximum file size: 29MB	
Accepted me types include: pdf, xis, xisx		
Describe how the submitted documentation	demonstrates funding loss.*	
Previous	Next	Sign and sub

Click "Project Design & Implementation."

	Applicant Information & Manage applicants (1)
es 8, 2025	NATIONAL CHILDRENS ALLIANCE INC 921 PENNSYLVANIA AVE SE SUITE 313, WASHINGTON, DC, 20003-2141, US 63-1044781 A L dustunderourfeet@gmail.com
	FORM QUESTIONS
	Complete the required fields below. Accepting applications until Aug 8, 2025 11:59 PM Project Design & Implementation
	Organization Information Pre Award Checklist Needs Statement Project Design & Implementa Capabilities and Competenci More ~
	ABSTRACT
	Applicants must provide a project abstract, which should include the following information (400 word max):
	Purpose of the proposed project Project activities to be performed Expected outcomes, deliverables, or milestones of the proposed project Service Area Intended beneficiary(les) of the proposed project
	Abstract* Example Proposal Abstract Template: The [insert Entity name] proposes to implement the [insert project name]. The purpose is to in the [insert service area]. Project activities include



6

Click the "Core Service 1" field (option to choose two distinct Core Services)

FORM QUESTIONS	🛓 Downloa
Complete the required fields below. Accepting applications until Aug 8, 2025 11:59 PM	
Organization Information Pre Award Checklist Needs Statement Project Design & Implementa Capabilities and Competenci	More ~
Please select only those objectives and outcomes that are relevant to your application scope of work and budget. It is recommended to choos that can be fully completed during the award period and should be specific, measurable, achievable, relevant, and time-bound. Please keep in objectives <u>does not</u> necessarily make for a stronger application. Core Service 1*	e only those objectives mind that choosing more
Core Service 2	~
Enter the estimated total number of children ages 0-10 that will be served with grant funds.*	

8

Select from dropdown (same dropdown in Core Service 1 & Core Service 2 fields)

	Due Assessed Chardelist	O Manda Chatamant	Devicest Devices & Involution	Constitution and Comparison	Moray
U Organization Information	Pre Award Checklist	U Needs Statement	Project Design & Implementa	Capabilities and Competenci	wore ~
Core Service 1*	Jectives and outcomes i I during the award period sarily make for a stronge	inat are relevant to your d and should be specific, r application.	application scope of work and but measurable, achievable, relevant	get, it is recommended to choose only i , and time-bound. Please keep in mind th	at choosing more
					~
Forensic Interview					
Medical Services					
Mental Health					
Multi-disciplinary Team					
Victim Advocacy					
Enter the estimated total num To be "served" means a program	iber of children ages 11-17 1, organization, or system adr	that will be served with gra nitted an individual and activ	ant funds.*② ely provided them services supported by	v NCA grant funding.	

9 If Forensic Interview selected, expand menu.

	st ① Needs Statement	Project Design & Implementa	Capabilities and Competenci	Mo	re∨
Please select only those objectives and outcome that can be fully completed during the award per objectives <u>does not</u> necessarily make for a stron	es that are relevant to your iod and should be specific ger application.	application scope of work and buc measurable, achievable, relevant	iget. It is recommended to choose only t , and time-bound. Please keep in mind th	those objective nat choosing m	es nore
Forensic Interview				×	~
Core Service 2					\sim
Open					
+Forensic Interview Objectiv	es & Outcomes				
Enter the estimated total number of children ages 0-1 To be "served" means a program, organization, or system	0 that will be served with grai admitted an individual and activ	nt funds.*② ely provided them services supported by	y NCA grant funding.		
Enter the estimated total number of children ages 0-1 To be "served" means a program, organization, or system Enter the estimated total number of children ages 11 To be "served" means a program, organization, or system	0 that will be served with gra admitted an individual and activ -17 that will be served with gra admitted an individual and activ	nt funds.* ely provided them services supported by ant funds.* ely provided them services supported by	/ NCA grant funding. / NCA grant funding.		
Enter the estimated total number of children ages 0-1 To be "served" means a program, organization, or system Center the estimated total number of children ages 11 To be "served" means a program, organization, or system	0 that will be served with gra admitted an individual and activ 17 that will be served with gr. admitted an individual and activ	nt funds.* ely provided them services supported by ant funds.* ely provided them services supported by	v NCA grant funding. v NCA grant funding.		

10 Respond to: "Enter the estimated total number of forensic services to be conducted."

Core Service 1*	
Forensic Interview	
Core Service 2	
- Forensic Interview Objectives & Outcomes	
To retain a forensic interviewer position to provide forensic servic	es to child victims.
Enter the estimated total number of forensic services to be conducted.*	
To train a forensic interviewer in approved initial FI training and/o	or ongoing training in the fiel
of child maltreatment and/or FI.	
Enter the projected total number of forensic interview trainings to be completed.	
Total number of training events held or attended with this NCA-grant award (may include trainings; conferences; workshops; we	binars; etc).
Optional Earopsic Sanvicas Objectiva	

11 Respond to Optional field: "Enter the projected total number of forensic interview trainings to be completed."

	ew A
Core Service 2	
– Fore	nsic Interview Objectives & Outcomes
To retai	a forensic interviewer position to provide forensic services to child victims.
Enter the es	mated total number of forensic services to be conducted.*
Ta tasia	a forensic interviewer in approved initial FI training and/or ongoing training in the field
of child	naltreatment and/or Fl.
of child	maltreatment and/or FI. Jected total number of forensic interview trainings to be completed. • of training events held or attended with this NCA-grant award (may include trainings; conferences; workshops; webinars; etc).

12 Respond to Optional field: "Other Forensic Services Objective".

To train a forensic interviewer in approved initial FI training and/or ongoing training in the field
of child maltreatment and/or FI.
Enter the projected total number of ferencic intension training to be completed
Total number of training events held or attended with this NCA-grant award (may include trainings; conferences; workshops; webinars; etc).
Optional Forensic Services Objective
Other Forensic Services Objective
Option to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

If Medical Services is selected, expand menu.

() Organization Information Pre Award C	Checklist ① Needs Statement	Project Design & Implementa	Capabilities and Competenci	More
Please select only those objectives and or that can be fully completed during the awar objectives <u>does not</u> necessarily make for	utcomes that are relevant to you ard period and should be specif a stronger application.	ir application scope of work and bud ic, measurable, achievable, relevant	dget. It is recommended to choose only th , and time-bound. Please keep in mind that	hose objectives at choosing more
Medical Services				× ×
Core Service 2				
				~
Enter the estimated total number of children a To be "served" means a program, organization, or	iges 0-10 that will be served with gr system admitted an individual and ac	rant funds.*② tively provided them services supported by	y NCA grant funding.	
Enter the estimated total number of children a To be "served" means a program, organization, or	iges 11-17 that will be served with (system admitted an individual and ac	grant funds.* 🕢 tively provided them services supported by	y NCA grant funding.	

14 Respond to: "Enter the estimated total medical exams/evaluations to be conducted."

Medical Services	×
Core Service 2	
- Medical Services Objectives & Outcomes	
To retain a trained medical provider (as defined in the Accreditatio	n Standards) to provide
medical services.	
Enter the estimated total medical exams/evaluations to be conducted.*	
To provide ongoing training/education for medical professionals to	meet the continuous
improvement standard and/or to qualify as an advanced medical c	consultant.
Enter the projected total number of medical trainings to be completed.	
Total number of training events held or attended with this NCA-grant award (may include trainings; conferences; workshops; webir	nars; etc).

15 Respond to Optional field: "Enter the projected total number of medical trainings to be completed."

Medical Services	×
are Service 2	
- Medical Services Objectives & Outcomes	
To retain a trained medical provider (as defined in the Accreditation Standards) to provide	
medical services.	
Pates the actimated table modified examples leaders to be conducted #	
Eller die estimated foral medical examisievaluations to be conducted.»	
To provide ongoing training/education for medical professionals to meet the continuous	
improvement standard and/or to qualify as an advanced medical consultant.	
Enter the projected total number of medical trainings to be completed. 🕖	
Total number of training events held or attended with this NCA-grant award (may include trainings; conferences; workshops; webinars; etc).	



To provide ongoing training/education for medical professionals to meet the continuous
improvement standard and/or to qualify as an advanced medical consultant.
Enter the projected total number of medical trainings to be completed. 📀 Total number of training events held or attended with this NCA-grant award (may include trainings; conferences; workshops; webinars; etc).
Optional Medical Services Objective
Other Medical Services Objective 📀 Option to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.
Exter the entimated total sumber of children area 0.10 that will be conved with grant funde 8.0
Enter the estimated total number of children ages 0-10 that will be served with grant funds.*0

If Mental Health is selected, expand menu.

Please select only those obje that can be fully completed do	ctives and outcomes t	hat are relevant to your	application scope of work and bu measurable achievable relevan	Idget. It is recommended to choose only t, and time-bound. Please keep in mind th	those objectives
objectives does not necessar	ily make for a stronger	application.	, measurable, aomerable, relevan	, and ante-bound. I lease keep in him a	nut choosing mo
Core Service 1*					
Mental Health					×
Core Service 2					
Open					
+ Mental Health	Objectives & C	utcomes			
Enter the estimated total number	r of children ages 0-10 th	hat will be served with gra	nt funds.*		
To be "served" means a program, o	rganization, or system adn	nitted an individual and activ	vely provided them services supported b	y NCA grant funding.	
Faturation and includes a second	f - bild	والمترجع والمترجع المرجع			
To be "served" means a program, o	rganization, or system adn	nitted an individual and activ	vely provided them services supported b	y NCA grant funding.	

18 Respond to: "Enter the estimated total number of evidence-based treatments to be conducted."

Core Service 1*	
Mental Health	×
Core Service 2	
- Mental Health Objectives & Outcomes	
To retain a mental health therapist to maintain mental hea	th evidence-based treatments (EBTs
To retain a mental health therapist to maintain mental hea	th evidence-based treatments (EBTs
To retain a mental health therapist to maintain mental hea	th evidence-based treatments (EBTs
To retain a mental health therapist to maintain mental hea	th evidence-based treatments (EBTs
To retain a mental health therapist to maintain mental heal	th evidence-based treatments (EBTs
To retain a mental health therapist to maintain mental hear Enter the estimated total number of evidence-based treatments to be conducted.* Enter the estimated total number of pre-screening assessments to be completed.	th evidence-based treatments (EBTs
To retain a mental health therapist to maintain mental heal	th evidence-based treatments (EBTs
To retain a mental health therapist to maintain mental heal Enter the estimated total number of evidence-based treatments to be conducted.* Enter the estimated total number of pre-screening assessments to be completed. Enter the estimated total number of post-screening assessments to be completed.	th evidence-based treatments (EBTs

19 Respond to Optional field: "Enter the estimated total number of pre-screening assessments to be completed."

Mental Health	× ~
Core Service 2	
	~
 Mental Health Objectives & Outcomes To retain a mental health therapist to maintain mental health evidence 	e-based treatments (FBTs).
Enter the estimated total number of evidence-based treatments to be conducted.*	
Enter the estimated total number of pre-screening assessments to be completed.	

20

Respond to Optional field: "Enter the estimated total number of post-screening assessments to be completed."

Mental Health	×
Core Service 2	
- Mental Health Objectives & Outcomes	
To retain a mental health therapist to maintain mental hea	th evidence-based treatments (EBT
Enter the activated total number of avidance based treatments to be conducted \$	
Enter the estimated total number of evidence-based treatments to be conducted."	
Enter the estimated total number of pre-screening assessments to be completed.	
Enter the estimated total number of pre-screening assessments to be completed.	
Enter the estimated total number of pre-screening assessments to be completed. Enter the estimated total number of post-screening assessments to be completed.	

21 Respond to Optional field: "Enter the anticipated total number of children/non-offending caregivers showing improvement after evidence-based treatment(s)."

Enter the esti	imated total number of evidence-based treatments to be conducted.*
Enter the esti	imated total number of pre-screening assessments to be completed.
Enter the esti	imated total number of post-screening assessments to be completed.
Enter the ant	cipated total number of children/non-offending caregivers showing improvement after evidence-based treatment(s).
To train experien	mental health providers in evidence-based mental health treatments to children ncing trauma from abuse.
Enter the pro	eted total number of evidence-based trainings to be completed. 💿 of training events held or attended with this NCA-grant award (may include trainings; conferences; workshops; webinars; etc).

22 Respond to Optional field: "Enter the projected total number of evidence-based trainings to be completed."

To train mental health providers in evidence-based mental health treatments to childre experiencing trauma from abuse.
To train mental health providers in evidence-based mental health treatments to childre experiencing trauma from abuse.
experiencing trauma from abuse. Enter the projected total number of evidence-based trainings to be completed. Total number of training events held or attended with this NCA-grant award (may include trainings; conferences; workshops; webinars; etc).
Enter the projected total number of evidence-based trainings to be completed. Total number of training events held or attended with this NCA-grant award (may include trainings; conferences; workshops; webinars; etc).
Optional Mental Health Objective
Other Mental Health Objective 💿 Option to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

23 Respond to Optional field: "Other Mental Health Objective"

Enter the anticipated total number of children/non-offending caregivers showing improvement after evidence-based treatment(s).
To train mental health providers in evidence-based mental health treatments to children experiencing trauma from abuse.
Enter the projected total number of evidence-based trainings to be completed. Total number of training events held or attended with this NCA-grant award (may include trainings; conferences; workshops; webinars; etc).
Optional Mental Health Objective
Utner Mental Health Ubjective V Option to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

24 If Multi-disciplinary Team is selected, expand menu.

Please select only those that can be fully complete	n Pre Award Checklist	U Needs Statement	Project Design & Implementa	Capabilities and Competenci	IVIG
Please select only those that can be fully complete					
objectives <u>does not</u> nece	objectives and outcomes ad during the award period ssarily make for a stronge	hat are relevant to your a l and should be specific, r application.	application scope of work and bu measurable, achievable, relevant	dget. It is recommended to choose only th , and time-bound. Please keep in mind th	hose objectiv at choosing i
Core Service 1*					×
Multi-disciplinary ream					^
Coro Espriso 2					
Core service 2					
+ Multi-Disc	plinary Team Obje	ctives & Outcome	es nt funds.*Ø		
To be "served" means a prog	am, organization, or system ad	nitted an individual and active	ely provided them services supported b	/ NCA grant funding.	
Enter the estimated total n	imber of children ages 11-17 am, organization, or system ad	that will be served with gra nitted an individual and active	ant funds.*⑦ ely provided them services supported b	y NCA grant funding.	
To be "served" means a prog					
To be "served" means a prog					

25 Respond to Optional field: "Enter a description of the anticipated MDT participation in both frequency and members in any of the following areas: case reviews; live forensic interviews; de-briefings; information-sharing."

 Multi-Disciplinary Team Objectives & Outcomes 	
To retain an MDT Coordinator position to maintain MDT engagement.	
Enter a description of the anticipated MDT participation in both frequency and members in any of the following areas: case reviews: live fore	nsic interviews; de-briefings;
normedu siteling.	
	;
To train the MDT Coordinator and/or MDT members in approved training in the	ne field of child
To train the MDT Coordinator and/or MDT members in approved training in the maltreatment.	ne field of child
To train the MDT Coordinator and/or MDT members in approved training in the maltreatment.	ne field of child
To train the MDT Coordinator and/or MDT members in approved training in the maltreatment.	ne field of child
To train the MDT Coordinator and/or MDT members in approved training in the maltreatment.	ne field of child

26 Respond to Optional field: "Enter the projected total number of MDT trainings to be completed."

1	o train the MDT Coordinator and/or MDT members in approved training in the field of child
r	naltreatment.
(Enter the projected total number of MDT trainings to be completed.
	Optional MDT Objective
	Other MDT Objective 📀 Option to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

27 Respond to Optional field: "Other MDT Objective"

Enter the projected total num	her of MDT trainings to be completed.			
Total number of training events	held or attended with this NCA-grant award (may	include trainings; conferen	ices; workshops; webinars; etc).	
Optional MDT O	bjective			
Other MDT Objective 🔞				
Option to enter an objective	ot listed. Objective must directly state the activity	r that will be funded and th	e resulting outcome.	
nter the estimated total number of o be "served" means a program, orga	f children ages 0-10 that will be served with gr nization, or system admitted an individual and ac	rant funds.* tively provided them servic	es supported by NCA grant funding	

If Victim Advocacy is selected, expand menu.

	Pre Award Checklist	tatement Project Design & Implementa	Capabilities and Competenci	More
Please select only those ob that can be fully completed objectives <u>does not</u> necess	jectives and outcomes that are releva during the award period and should t arily make for a stronger application.	nt to your application scope of work and bu se specific, measurable, achievable, relevan	dget. It is recommended to choose only t t, and time-bound. Please keep in mind th	hose objectives nat choosing mo
Core Service 1*				
Victim Advocacy				×
+ Victim Advo	acy Objectives & Outcom	es		
Enter the estimated total num To be "served" means a program	ber of children ages 0-10 that will be serv organization, or system admitted an individ	ed with grant funds.*② ual and actively provided them services supported b	y NCA grant funding.	
Enter the estimated total num To be "served" means a program Enter the estimated total num To be "served" means a program	ber of children ages 0-10 that will be serv organization, or system admitted an individ ber of children ages 11-17 that will be ser organization, or system admitted an individ	ed with grant funds.* ual and actively provided them services supported b ved with grant funds.* ual and actively provided them services supported b	y NCA grant funding. y NCA grant funding.	

29 Respond to: "Enter the estimated total number of victim advocacy services to be provided."

vicant Advocacy	×
Core Service 2	
– Victim Advocacy Objec	tives & Outcomes
To retain a victim advoc	ate position to provide victim advocate services as described in the
Accreditation Standards	5.
Enter the estimated total number of victi	im advoracy services to be provided *
	montoney service to be provided.
Enter the projected total number of refer	rrale to other utities coulde considers and support coulders *
Enter the projected total humber of relea	nais to ourer vicun service providers and support services."
To train a victim advoca	te in approved initial training and/or opgoing training in the field of child
maltreatment	
main earnent.	
	m advocary trainings to be completed

30 Respond to: "Enter the projected total number of referrals to other victim service providers and support services."

Victim Advocacy	×
Core Service 2	
- Victim Advocacy Objectives & Outcomes	
To retain a victim advocate position to provide	victim advocate services as described in the
Accreditation Standards.	
Fotor the actimated total number of victim advances remained to be provided \$	
Enter the estimated total number of victim advotacy services to be provided	
Enterine projected total number of referrals to other victim service providers and su	pport services.*
To train a victim advocate in approved initial tra	aining and/or ongoing training in the field of chil
maltreatment.	
indit cathere	

31 Respond to Optional field: "Enter the projected total number of victim advocacy trainings to be completed."

To	train a victim advocate in approved initial training and/or ongoing training in the field of child altreatment.
E	nter the projected total number of victim advocacy trainings to be completed.
Ol	otional Victim Advocacy Objective
0	ther Victim Advocacy Objective 💿 ption to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

32 Respond to Optional field: "Other Victim Advocacy Objective"

Enter the projected total number of referrals to other victim service providers and support services.*
To train a victim advocate in approved initial training and/or ongoing training in the field of child maltreatment.
Enter the projected total number of victim advocacy trainings to be completed. 🕢 Total number of training events held or attended with this NCA-grant award (may include trainings; conferences; workshops; webinars; etc).
Optional Victim Advocacy Objective
Option to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

33 Respond to: "Enter the estimated total number of children ages 0-10 that will be served with grant funds."

1		
Enter the estimated tota	al number of children ages 0-10 that will be served with grant funds.* 🛛	
To be "served" means a pr	ogram, organization, or system admitted an individual and actively provided them services supported by NCA grant funding.	
Enter the estimated tota	al number of children ages 11-17 that will be served with grant funds.*0	
To be "served" means a p	ogram, organization, or system admitted an individual and actively provided them services supported by NCA grant funding.	
Enter the projected tota	l number of unique professionals trained with grant funds. 👔	
Total number of individua	Is trained with NCA-grant funds. This number should be UNDUPLICATED - if one individual attended multiple training events they would only count as one individual.	
Applicants must discuss	plans for sustainability beyond the grant period.*	
		_1

34 Respond to: "Enter the estimated total number of children ages 11-17 that will be served with grant funds."

	Uption to enter an objective not listed. Ubjective must directly state the activity that will be funded and the resulting outcome.
	inter the estimated total number of children ages 0-10 that will be served with grant funds."® To be "served" means a program, organization, or system admitted an individual and actively provided them services supported by NCA grant funding.
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	.nter the estimated total number of children ages 11-17 that will be served with grant tunds. "@ "beb" served" means a program, organization, or system admitted an individual and actively provided them services supported by NCA grant funding.
	inter the projected total number of unique professionals trained with grant funds. 🔞
	Fotal number of individuals trained with NCA-grant funds. This number should be UNDUPLICATED - if one individual attended multiple training events they would only count as one individual.
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	Total number of Individuals trained with NCA-grant funds. This number should be UNDUPLICATED - If one individual attended multiple training events they would only count as one individual.

35 Respond to Optional field: "Enter the projected total number of unique professionals trained with grant funds."

1	Enter the estimated total number of children ages 0-10 that will be served with grant funds.* 🥑 To be "served" means a program, organization, or system admitted an individual and actively provided them services supported by NCA grant funding.	
	Enter the estimated total number of children ages 11-17 that will be served with grant funds.* 🛿	
	To be "served" means a program, organization, or system admitted an individual and actively provided them services supported by NCA grant funding.	
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36 Respond to: "Applicants must discuss plans for sustainability beyond the grant period."

Enter the estimated total number of children ages 0-10 that will be served with grant funds.* To be "served" means a program, organization, or system admitted an individual and actively provided them services supported by NCA grant funding.
Enter the estimated total number of children ages 11-17 that will be served with grant funds.* To be "served" means a program, organization, or system admitted an individual and actively provided them services supported by NCA grant funding.
Enter the projected total number of unique professionals trained with grant funds. ? Total number of individuals trained with NCA-grant funds. This number should be UNDUPLICATED - if one individual attended multiple training events they would only count as one individual.
Applicants must discuss plans for sustainability beyond the grant period.*

37 Click "More" if "Other Required Attachments" section not visible.

	Applicant Information & Manage applicants (1)
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Click "Other Required Attachments"

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al	NSP Core Services Goal: To provide necessary support to developed CACs to ensure capacity to deliver core CAC services is maintained to meet demonstrated financial needs.			
	Applicant Information	음* Manage applicants (1) ^		
IS /ices 28, 2025	NATIONAL CHILDRENS ALLIANCE INC 921 PENNSYLVANIA AVE SE SUITE 313, WASHINGTON, DC, 20003-2141, US 63-1044781	A L dustunderourfeet@gmail.com		
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45 Click "Applications" at top left at any time to take you to main Applications page. bub Applications AL ~ **NSP Core Services** Goal: To provide necessary support to developed CACs to ensure capacity to deliver core CAC services is maintained to meet demonstrated financial needs ildren's elines Applicant Information 은+ Manage applicants (1) ^ A L dustunderourfeet@gmail.com NATIONAL CHILDRENS ALLIANCE INC 921 PENNSYLVANIA AVE SE SUITE 313, WASHINGTON, DC, 20003-2141, US 63-1044781 AL Update 1 Forms organization re Services n May 28, 2025 FORM QUESTIONS La Download Complete the required fields below. Accepting applications until Aug 8, 2025 11:59 PM More ~ O Organization Information
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Once you have completed all required and relevant components, have reviewed your application, and are ready to submit, click "Sign and submit". If you are not ready to sign and submit at this time, this application has been saved as a Draft throughout the entire process.

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