

Grant Portal General Application Sections - Followed by DTVF Sections

This guide provides a comprehensive step-by-step process for navigating the NCA grant application portal for those General Sections that apply to all grants. It is then followed by DTVF grant specific sections, which in this case include: Needs Statement; Project Design/Implementation; Other Required Attachments section.

1

If an account in the NEW applicant portal has not been created. Click on Create Account button and follow the instructions.

Ease of sign-in with BBID

Applicants can use one central identity to securely sign into Blackbaud Grantmaking and the rest of the Blackbaud product suite

- Access applications across funders with one username and password
- Orgs who already have a BBID can sign in

The screenshot displays two overlapping panels. The left panel is titled 'Sign up' and contains a form with the following fields: 'Email address', 'Password' (with a note: 'Must contain at least 12 characters and 3 of the following: Capital letter, Lowercase letter, Number, Special character (&, @, %, etc.)'), 'Confirm password', 'First name', and 'Last name'. Below these fields is a 'Sign up' button, followed by 'or' and two social login options: 'Sign up with Google' and 'Sign up with Apple'. The right panel is titled 'Applicant Portal' and contains a 'Sign in' form with an 'Email address*' field, a 'Remember me' checkbox, and a 'Sign in' button. Below the 'Sign in' button are links for 'Need help signing in?' and 'Create account'. An arrow points from the 'Create account' link in the right panel to the 'Sign up' form in the left panel.

2

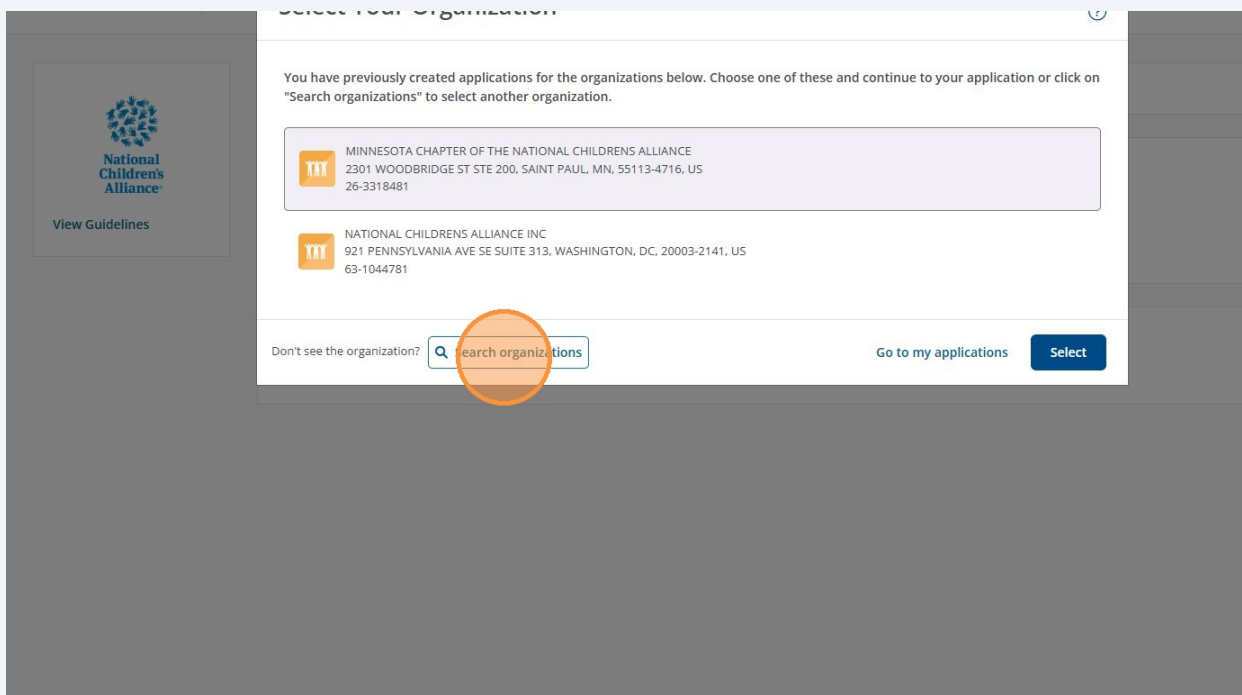
Once account created, and logged in proceed to apply to the application(s) your organization is eligible and interested in applying to. Each grant type will have its own application link found on the NCA Engage Application Page.

Click "Start new application"

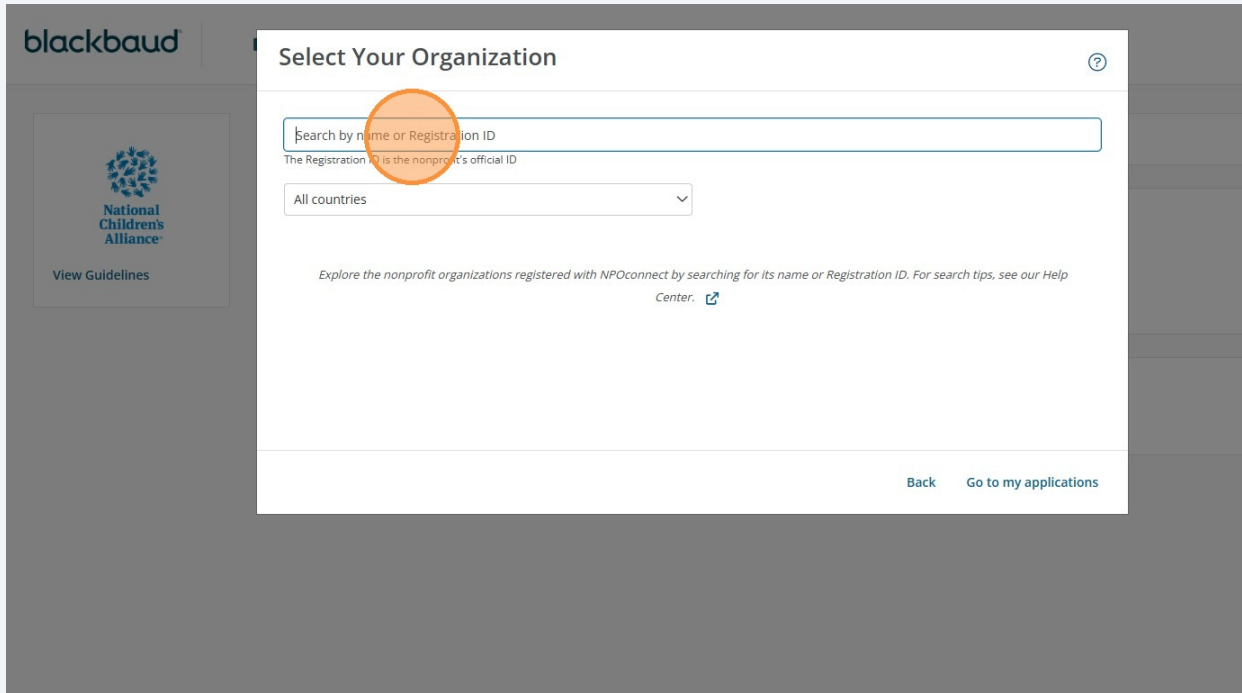


3

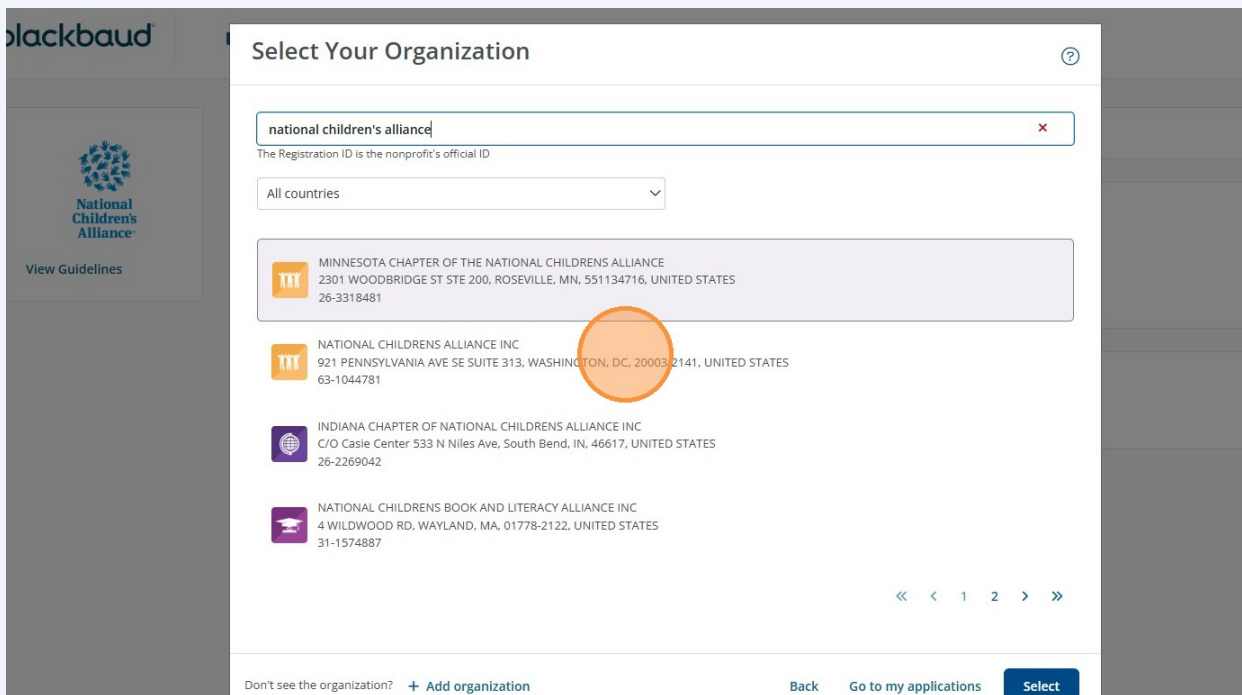
If your organization has not previously applied in this NEW PORTAL, click "Search organizations"



4 Enter your organization name in "Search by name or Registration ID" field.



5 Select your organization (please confirm name, address, and tax ID are correct)



6 Click "Select"

The Registration ID is the nonprofit's official ID

All countries

- MINNESOTA CHAPTER OF THE NATIONAL CHILDRENS ALLIANCE
2301 WOODBRIDGE ST STE 200, ROSEVILLE, MN, 551134716, UNITED STATES
26-3318481
- NATIONAL CHILDRENS ALLIANCE INC**
921 PENNSYLVANIA AVE SE SUITE 313, WASHINGTON, DC, 20003-2141, UNITED STATES
63-1044781
- INDIANA CHAPTER OF NATIONAL CHILDRENS ALLIANCE INC
C/O Casle Center 533 N Niles Ave, South Bend, IN, 46617, UNITED STATES
26-2269042
- NATIONAL CHILDRENS BOOK AND LITERACY ALLIANCE INC
4 WILDWOOD RD, WAYLAND, MA, 01778-2122, UNITED STATES
31-1574887

« < 1 2 > »

Don't see the organization? [+ Add organization](#) [Back](#) [Go to my applications](#) [Select](#)

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7 Click "Manage applicants (1)" to add additional personnel as applicants.

ud 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.

Applicant Information [Manage applicants \(1\)](#)

- NATIONAL CHILDRENS ALLIANCE INC**
921 PENNSYLVANIA AVE SE SUITE 313, WASHINGTON, DC,
20003-2141, US
63-1044781 [Update organization](#)
- AL A L
dustunderourfeet@gmail.com

FORM QUESTIONS

Complete the required fields below.
Accepting applications until Aug 8, 2025 11:59 PM [Download](#)

- Organization Information
- Pre Award Checklist
- Needs Statement
- Project Design & Implementa...
- Capabilities and Competenci...
- More

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.

8

Enter applicant email address. If not found, enter First and Last Name

blackbaud

Manage Applicants

Add Applicant
Add additional applicants to this application and select what permissions they have.

This applicant does not exist. Create an applicant below and assign permissions.

First Name*

Last Name*

Language*

Is this person an employee of National Childrens Alliance?

APPLICANT	PERMISSIONS
A L dustunderourfeet@gmail.com	<ul style="list-style-type: none">Owner of applicationEdit - Can add/edit and delete applicantsReceives application update emails

The CAC address refers to the place of performance of the grant award.

9

Select preferred Language

blackbaud

Manage Applicants

Add Applicant
Add additional applicants to this application and select what permissions they have.

This applicant does not exist. Create an applicant below and assign permissions.

First Name*

Last Name*

Language*

Is this person an employee of National Childrens Alliance?

APPLICANT	PERMISSIONS
A L dustunderourfeet@gmail.com	<ul style="list-style-type: none">Owner of applicationEdit - Can add/edit and delete applicantsReceives application update emails

The CAC address refers to the place of performance of the grant award.

10 Select "Is this person an employee of (your organization)?"

Add Applicant
Add additional applicants to this application and select what permissions they have.

maria.oter@nca-online.org

This applicant does not exist. Create an applicant below and assign permissions.

First Name* Maria Last Name* Oter

Language* English (American)

Is this person an employee of National Children's Alliance?

Clear Create

APPLICANT	PERMISSIONS
A L dustunderourfeet@gmail.com	<ul style="list-style-type: none">Owner of applicationEdit - Can add/edit and delete applicantsReceives application update emails

Close

The CAC address refers to the place of performance of the grant award.

+ Contacts

Saved

11 Click "Create"

Add Applicant
Add additional applicants to this application and select what permissions they have.

maria.oter@nca-online.org

This applicant does not exist. Create an applicant below and assign permissions.

First Name* Maria Last Name* Oter

Language* English (American)

Is this person an employee of National Children's Alliance?

Clear Create

APPLICANT	PERMISSIONS
A L dustunderourfeet@gmail.com	<ul style="list-style-type: none">Owner of applicationEdit - Can add/edit and delete applicantsReceives application update emails

Close

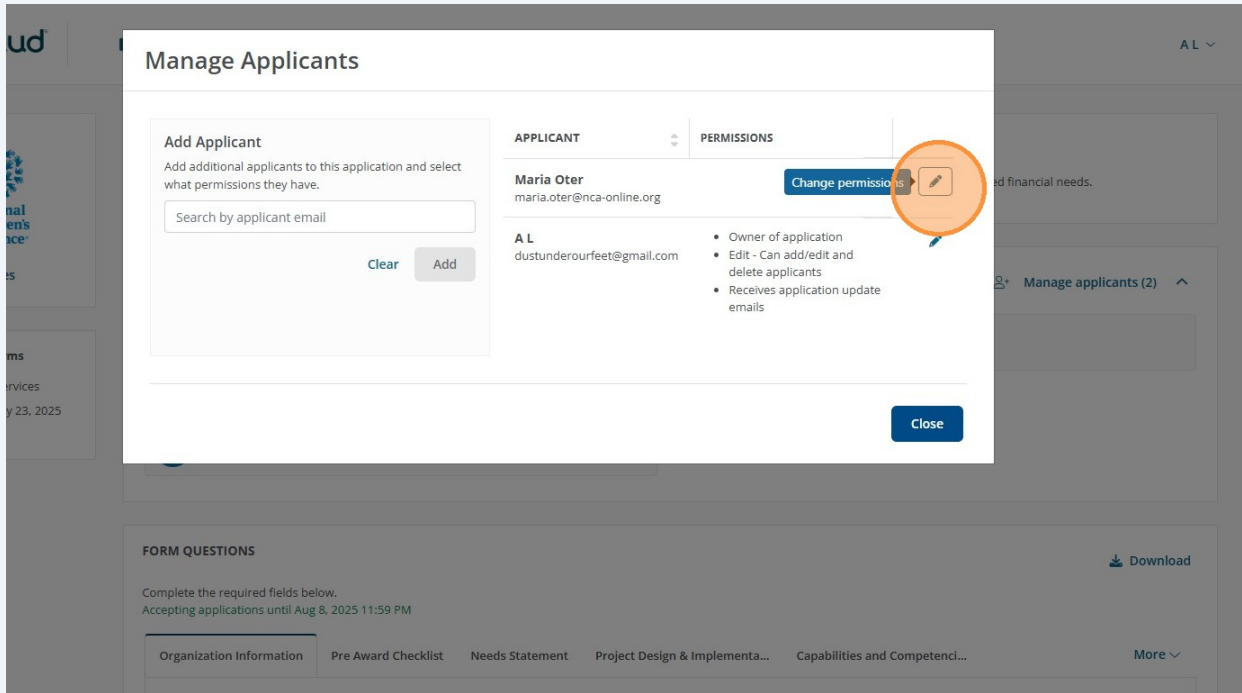
The CAC address refers to the place of performance of the grant award.

+ Contacts

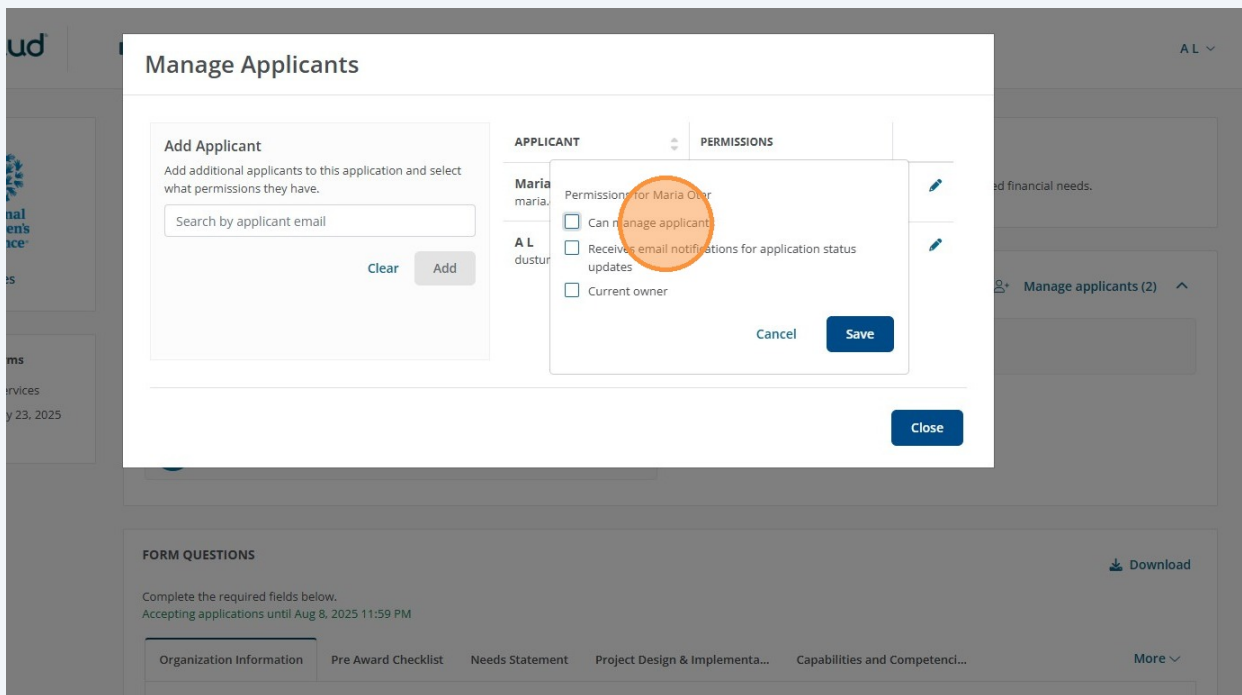
Saved

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12 Click here.



13 Select permissions for this additional applicant



14

Make a selection on: "Is the C.A.C. address for this application the same as the address listed in the Applicant Information above?" Keeping in mind that the address must be the place of performance for the grant award. P.O. Boxes are not acceptable.

MO Maria Oter
maria.oter@nca-online.org

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

Next Sign and s

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15

If "No" is selected: Complete the Organization Details section

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.

No

- Organization Details

Organization Name*

Street Address*

The address entered must equal the place of performance of the grant award.

City*

State*

Postal Code*

According to [Rural Health Information Hub](#), is your CAC eligible for the CMS-Rural Health Clinics (RHC) Program?*

16 Expand the Contacts section and complete all required fields.

The screenshot shows a form with the following fields: a text input containing 'cincinnati', a dropdown for 'State*' with 'OH' selected, a text input for 'Postal Code*' with '45202', and a dropdown for 'Country*' with 'United States' selected. Below these is a section titled 'Contacts' with a plus sign icon and the word 'Contacts'. A blue 'Saved' button is in the bottom left, and 'Next' and 'Sign and s' buttons are in the bottom right. A copyright notice '©2025 YourCause - GrantsConnect (2.121.2) (tv69cm) Terms of Ser' is at the bottom right.

17 Click "Pre Award Checklist"

The screenshot shows a 'FORM QUESTIONS' section with a sub-header 'Complete the required fields below. Accepting applications until Aug 8, 2025 11:59 PM'. There are five tabs: 'Organization Information', 'Pre Award Checklist' (highlighted with an orange circle), 'Needs Statement', 'Project Design & Implementa...', and 'Capabilities and Competenci...'. Below the tabs is a question: 'Is the CAC address for this application the same as the address listed in the Applicant Information above?*' with a 'No' answer. Below that is an expanded 'Organization Details' section with fields for 'Organization Name*' (Cosette Industries), 'Street Address*' (1254 Main St), and 'City*' (cincinnati). To the right of the 'Street Address' field is another question: 'According to Rural Health Information Hub, is your CAC eligible for the CMS - Rural Health Clinics (RHC) Program?' with a 'No' answer.

18 Click on "Please indicate what type of audit the applicant has had performed"

Organization Information | Pre Award Checklist | Needs Statement | Project Design & Implementa... | Capabilities and Competenci...

- Audit/General Information

Please indicate what type of audit the applicant has had performed* ?

Date of Most Recent Single Audit or Audited Financial Statements ?
Date should be fiscal year end and not date audit was conducted.

MM/DD/YYYY

On the most recent audit, what was the auditor's opinion?*

In the past three fiscal years, no "Materials Weakness" was disclosed.

Has the applicant organization been involved in any other financial or programmatic audits in the last three years?* ?

If yes, please list the agencies that conducted the audit and when the audit was completed.

Has your organization managed Federal grants or cooperative agreements within the last 36 months?*

19 Make a selection from drop-down options

Organization Information | Pre Award Checklist | Needs Statement | Project Design & Implementa... | Capabilities and Competenci...

- Audit/General Information

Please indicate what type of audit the applicant has had performed* ?

Audited Financial Statements

None of the Above

Single Audit

On the most recent audit, what was the auditor's opinion?*

In the past three fiscal years, no "Materials Weakness" was disclosed.

Has the applicant organization been involved in any other financial or programmatic audits in the last three years?* ?

If yes, please list the agencies that conducted the audit and when the audit was completed.

Has your organization managed Federal grants or cooperative agreements within the last 36 months?*

20

Select "Date of Most Recent Single Audit or Audited Financial Statements" if applicable.

Organization Information | Pre Award Checklist | Needs Statement | Project Design & Implementa... | Capabilities and Competenci...

- Audit/General Information

Please indicate what type of audit the applicant has had performed*[?]

Single Audit x

Date of Most Recent Single Audit or Audited Financial Statements [?]
Date should be fiscal year end and not date audit was conducted.

MM/DD/YYYY 📅

On the most recent audit, what was the auditor's opinion?*

In the past three fiscal years, no "Materials Weakness" was disclosed.

Has the applicant organization been involved in any other financial or programmatic audits in the last three years?*[?]

If yes, please list the agencies that conducted the audit and when the audit was completed.

Has your organization managed Federal grants or cooperative agreements within the last 36 months?*

21

Click the "On the most recent audit, what was the auditor's opinion?"

Organization Information | Pre Award Checklist | Needs Statement | Project Design & Implementa... | Capabilities and Competenci...

- Audit/General Information

Please indicate what type of audit the applicant has had performed*[?]

Single Audit x

Date of Most Recent Single Audit or Audited Financial Statements [?]
Date should be fiscal year end and not date audit was conducted.

04/30/2025 📅

On the most recent audit, what was the auditor's opinion?*


In the past three fiscal years, no "Materials Weakness" was disclosed.


Has the applicant organization been involved in any other financial or programmatic audits in the last three years?*[?]


If yes, please list the agencies that conducted the audit and when the audit was completed.

Has your organization managed Federal grants or cooperative agreements within the last 36 months?*

22 Make a selection from drop-down options

Please indicate what type of audit the applicant has had performed* 

Single Audit 

Date of Most Recent Single Audit or Audited Financial Statements 
Date should be fiscal year end and not date audit was conducted.

04/30/2025


On the most recent audit, what was the auditor's opinion?*

Disclaimer-Going Concern-Adverse Opinions
N/A: No audits as described above
Qualified Opinion
Unqualified Opinion

If yes, please list the agencies that conducted the audit and when the audit was completed.


Has your organization managed Federal grants or cooperative agreements within the last 36 months?*


Organization's Annual Budget*
If you are part of an umbrella organization, please specify the budget for your organization only.




23 Click the "In the past three fiscal years, no "Materials Weakness" was disclosed."

- Audit/General Information


Please indicate what type of audit the applicant has had performed* 

Single Audit 

Date of Most Recent Single Audit or Audited Financial Statements 
Date should be fiscal year end and not date audit was conducted.

04/30/2025

On the most recent audit, what was the auditor's opinion?*

Unqualified Opinion 


In the past three fiscal years, no "Materials Weakness" was disclosed.

Has the applicant organization been involved in any other financial or programmatic audits in the last three years?*

If yes, please list the agencies that conducted the audit and when the audit was completed.

Has your organization managed Federal grants or cooperative agreements within the last 36 months?*

Organization's Annual Budget*
If you are part of an umbrella organization, please specify the budget for your organization only.



24 Make a selection: True/False

Please indicate what type of audit the applicant has had performed.

Single Audit ✕

Date of Most Recent Single Audit or Audited Financial Statements ?
Date should be fiscal year end and not date audit was conducted.

04/30/2025

On the most recent audit, what was the auditor's opinion?*

Unqualified Opinion ✕

In the past three fiscal years, no "Materials Weakness" was disclosed.

False

True

If yes, please list the agencies that conducted the audit and when the audit was completed.

Has your organization managed Federal grants or cooperative agreements within the last 36 months?*

Organization's Annual Budget*
If you are part of an umbrella organization, please specify the budget for your organization only.

25 Click the "Has the applicant organization been involved in any other financial or programmatic audits in the last three years?"

Single Audit ✕

Date of Most Recent Single Audit or Audited Financial Statements ?
Date should be fiscal year end and not date audit was conducted.

04/30/2025

On the most recent audit, what was the auditor's opinion?*

Unqualified Opinion ✕

In the past three fiscal years, no "Materials Weakness" was disclosed.

False

True ✕

Has the applicant organization been involved in any other financial or programmatic audits in the last three years?*

No

Yes

Has your organization managed Federal grants or cooperative agreements within the last 36 months?*

Organization's Annual Budget*
If you are part of an umbrella organization, please specify the budget for your organization only.

26 Make a selection: Yes/No

Single Audit x

Date of Most Recent Single Audit or Audited Financial Statements ?
Date should be fiscal year end and not date audit was conducted.

04/30/2025

On the most recent audit, what was the auditor's opinion?*

Unqualified Opinion x

In the past three fiscal years, no "Materials Weakness" was disclosed.

True x

Has the applicant organization been involved in any other financial or programmatic audits in the last three years?*

No ?

Yes

Has your organization managed Federal grants or cooperative agreements within the last 36 months?*

Organization's Annual Budget*
If you are part of an umbrella organization, please specify the budget for your organization only.

Saved

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27 If applicable, enter information in "If yes, please list the agencies that conducted the audit and when the audit was completed."

04/30/2025

On the most recent audit, what was the auditor's opinion?*

Unqualified Opinion x

In the past three fiscal years, no "Materials Weakness" was disclosed.

True x

Has the applicant organization been involved in any other financial or programmatic audits in the last three years?*

No ?

If yes, please list the agencies that conducted the audit and when the audit was completed.

Has your organization managed Federal grants or cooperative agreements within the last 36 months?*

Organization's Annual Budget*
If you are part of an umbrella organization, please specify the budget for your organization only.

Saved

Recipients of Federal funds must maintain adequate accounting systems that meet the criteria outlined in 2 CFR §200.302. The resp
to this agreement are used to assist in the National Children's Alliance's (NCA) evaluation of your accounting system to ensure the

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28

Click the "Has your organization managed Federal grants or cooperative agreements within the last 36 months?"

04/30/2025

On the most recent audit, what was the auditor's opinion?*

Unqualified Opinion

In the past three fiscal years, no "Materials Weakness" was disclosed.

True

Has the applicant organization been involved in any other financial or programmatic audits in the last three years?*

No

If yes, please list the agencies that conducted the audit and when the audit was completed.

na

Has your organization managed federal grants or cooperative agreements within the last 36 months?*

Organization's Annual Budget*

If you are part of an umbrella organization, please specify the budget for your organization only.

na

Recipients of Federal funds must maintain adequate accounting systems that meet the criteria outlined in 2 CFR §200.302. The response to this assessment are used to assist in the National Children's Alliance's (NCA) evaluation of your accounting system to ensure the

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Saved

29

Make a selection: Yes/No

04/30/2025

On the most recent audit, what was the auditor's opinion?*

Unqualified Opinion

In the past three fiscal years, no "Materials Weakness" was disclosed.

True

Has the applicant organization been involved in any other financial or programmatic audits in the last three years?*

No

If yes, please list the agencies that conducted the audit and when the audit was completed.

na

Has your organization managed Federal grants or cooperative agreements within the last 36 months?*

No

Yes

Recipients of Federal funds must maintain adequate accounting systems that meet the criteria outlined in 2 CFR §200.302. The response to this assessment are used to assist in the National Children's Alliance's (NCA) evaluation of your accounting system to ensure the

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Saved

30 Enter your "Organization's Annual Budget" here

Has the applicant organization been involved in any other financial or programmatic audits in the last three years?*

No

If yes, please list the agencies that conducted the audit and when the audit was completed.

na

Has your organization managed Federal grants or cooperative agreements within the last 36 months?*

Yes

Organization's Annual Budget*

If you are part of an umbrella organization, please specify the budget for your organization only.

Recipients of Federal funds must maintain adequate accounting systems that meet the criteria outlined in 2 CFR §200.302. The response to this assessment are used to assist in the National Children's Alliance's (NCA) evaluation of your accounting system to ensure the adequate, appropriate, and transparent use of Federal funds.

+ I certify that the following statements are true:

+ The following policies are board adopted/agency approved and currently in place and meet the requirements of 2 CFR 200 and/or the DOJ Financial Guide:

Saved

31 Expand the certifications section

Has your organization managed Federal grants or cooperative agreements within the last 36 months?*

Yes

Organization's Annual Budget*

If you are part of an umbrella organization, please specify the budget for your organization only.

1,000,000

Recipients of Federal funds must maintain adequate accounting systems that meet the criteria outlined in 2 CFR §200.302. The response to this assessment are used to assist in the National Children's Alliance's (NCA) evaluation of your accounting system to ensure the adequate, appropriate, and transparent use of Federal funds.

+ I certify that the following statements are true:

+ The following policies are board adopted/agency approved and currently in place and meet the requirements of 2 CFR 200 and/or the DOJ Financial Guide:

Previous Next Sign and s

Saved

32 The applicant organization utilizes accounting software

Recipients of Federal funds must maintain adequate accounting systems that meet the criteria outlined in 2 CFR §200.302. The responses to this assessment are used to assist in the National Children's Alliance's (NCA) evaluation of your accounting system to ensure the adequate, appropriate, and transparent use of Federal funds.

- I certify that the following statements are true:

The applicant organization utilizes accounting software.*
Applicant will be able to provide the necessary reports and ledgers upon request.

The applicant organization's accounting system separately identifies receipt and expenditure of program funds for each grant.*
Expenses must be identified as expenses for the individual NCA grant award in the accounting system.

The applicant organization's accounting system provides control and accountability of federal funds.*
Including prevention of expenditures in excess of approved budget and in compliance with federal guidelines.

The financial management system is capable of producing a detailed activity ledger (GL) for each grant.*

The applicant has a system in place to track and accurately allocate employees actual time spent performing work for each federal award.*
Records are maintained for each employee that track actual time spent performing work for each federal award, and to accurately allocate charges for employee salaries and wages for each federal award and maintain records to support actual time spent and specific allocation of charges associated with each employee.

33 The applicant organization's accounting system separately identifies receipt and expenditure of program funds for each grant.

Recipients of Federal funds must maintain adequate accounting systems that meet the criteria outlined in 2 CFR §200.302. The responses to this assessment are used to assist in the National Children's Alliance's (NCA) evaluation of your accounting system to ensure the adequate, appropriate, and transparent use of Federal funds.

- I certify that the following statements are true:

The applicant organization utilizes accounting software.*
Applicant will be able to provide the necessary reports and ledgers upon request.

The applicant organization's accounting system separately identifies receipt and expenditure of program funds for each grant.*
Expenses must be identified as expenses for the individual NCA grant award in the accounting system.

The applicant organization's accounting system provides control and accountability of federal funds.*
Including prevention of expenditures in excess of approved budget and in compliance with federal guidelines.

The financial management system is capable of producing a detailed activity ledger (GL) for each grant.*

The applicant has a system in place to track and accurately allocate employees actual time spent performing work for each federal award.*
Records are maintained for each employee that track actual time spent performing work for each federal award, and to accurately allocate charges for employee salaries and wages for each federal award and maintain records to support actual time spent and specific allocation of charges associated with each employee.

34

The applicant organization's accounting system provides control and accountability of federal funds.

✓ Saved

- I certify that the following statements are true:

The applicant organization utilizes accounting software.*
Applicant will be able to provide the necessary reports and ledgers upon request.

True

x

The applicant organization's accounting system separately identifies receipt and expenditure of program funds for each grant.*
Expenses must be identified as expenses for the individual NCA grant award in the accounting system.

True

x

The applicant organization's accounting system provides control and accountability of federal funds.*
Including prevention of expenditures in excess of approved budget and in compliance with federal guidelines.

The financial management system is capable of producing a detailed activity ledger (GL) for each grant.*

The applicant has a system in place to track and accurately allocate employees actual time spent performing work for each federal award.*
Records are maintained for each employee that track actual time spent performing work for each federal award, and to accurately allocate charges for employee salaries and wages for each federal award and maintain records to support actual time spent and specific allocation of charges associated with each employee.

+ The following policies are board adopted/agency approved and currently in place and meet the requirements of 2 CFR 200 and/or the DOJ Financial Guide:

35

The financial management system is capable of producing a detailed activity ledger (GL) for each grant.

⇐ Saving

I certify that the following statements are true:

The applicant organization utilizes accounting software.*
Applicant will be able to provide the necessary reports and ledgers upon request.

True

x

The applicant organization's accounting system separately identifies receipt and expenditure of program funds for each grant.*
Expenses must be identified as expenses for the individual NCA grant award in the accounting system.

True

x

The applicant organization's accounting system provides control and accountability of federal funds.*
Including prevention of expenditures in excess of approved budget and in compliance with federal guidelines.

True

x

The financial management system is capable of producing a detailed activity ledger (GL) for each grant.*

False

True

The applicant has a system in place to track and accurately allocate employees actual time spent performing work for each federal award.*
Records are maintained for each employee that track actual time spent performing work for each federal award, and to accurately allocate charges for employee salaries and wages for each federal award and maintain records to support actual time spent and specific allocation of charges associated with each employee.

+ The following policies are board adopted/agency approved and currently in place and meet the requirements of 2 CFR 200 and/or the DOJ Financial Guide:

36

The applicant has a system in place to track and accurately allocate employees actual time spent performing work for each federal award.

Employees must be identified as employees for the duration of the grant period in the accounting system.

True x

The applicant organization's accounting system provides control and accountability of federal funds.*
Including prevention of expenditures in excess of approved budget and in compliance with federal guidelines.

True x

The financial management system is capable of producing a detailed activity ledger (GL) for each grant.*

True x

The applicant has a system in place to track and accurately allocate employees actual time spent performing work for each federal award.*
Records are maintained for each employee that track actual time spent performing work for each federal award, and to accurately allocate charges for employee salaries and wages for each federal award and maintain records to support actual time spent and specific allocation of charges associated with each employee.

True

False

True

+ The following policies are board adopted/agency approved and currently in place and meet the requirements of 2 CFR 200 and/or the DOJ Financial Guide:

Previous Next Sign and s

Saved

37

Expand the policies in place section

Including prevention of expenditures in excess of approved budget and in compliance with federal guidelines.

True x

The financial management system is capable of producing a detailed activity ledger (GL) for each grant.*

True x

The applicant has a system in place to track and accurately allocate employees actual time spent performing work for each federal award.*
Records are maintained for each employee that track actual time spent performing work for each federal award, and to accurately allocate charges for employee salaries and wages for each federal award and maintain records to support actual time spent and specific allocation of charges associated with each employee.

True x

+ The following policies are board adopted/agency approved and currently in place and meet the requirements of 2 CFR 200 and/or the DOJ Financial Guide:

Previous Next Sign and s

Saved

38 Pay rates and benefits, time and attendance, and payment methods.

The applicant has a system in place to track and accurately allocate employees actual time spent performing work for each federal award.*
Records are maintained for each employee that track actual time spent performing work for each federal award, and to accurately allocate charges for employee salaries and wages for each federal award and maintain records to support actual time spent and specific allocation of charges associated with each employee.

The following polices are board adopted/agency approved and currently in place and meet the requirements of 2 CFR 200 and/or the DOJ Financial Guide:

Pay rates and benefits, time and attendance, and payment methods.*

Management of equipment, supplies and property.*

Purchase/procurement of equipment, supplies, property, and services.*

Checking the Excluded Parties List system for suspended or debarred consultants/contractors prior to obligation.*

Record retention*

Travel Policies*

39 Management of equipment, supplies and property.

The following polices are board adopted/agency approved and currently in place and meet the requirements of 2 CFR 200 and/or the DOJ Financial Guide:

Pay rates and benefits, time and attendance, and payment methods.*

Management of equipment, supplies and property.*

Purchase/procurement of equipment, supplies, property, and services.*

Checking the Excluded Parties List system for suspended or debarred consultants/contractors prior to obligation.*

Record retention*

Travel Policies*

Separation of financial duties*

Saved

40 Purchase/procurement of equipment, supplies, property, and services.

True

The following policies are board adopted/agency approved and currently in place and meet the requirements of 2 CFR 200 and/or the DOJ Financial Guide:

Pay rates and benefits, time and attendance, and payment methods.*
True x

Management of equipment, supplies and property.*
True x

Purchase/procurement of equipment, supplies, property, and services.*
 False
 True

Record retention*

Travel Policies*

Separation of financial duties*

Saved

41 Checking the Excluded Parties List

True

The following policies are board adopted/agency approved and currently in place and meet the requirements of 2 CFR 200 and/or the DOJ Financial Guide:

Pay rates and benefits, time and attendance, and payment methods.*
True x

Management of equipment, supplies and property.*
True x

Purchase/procurement of equipment, supplies, property, and services.*
True x

Checking the Excluded Parties List system for suspended or debarred consultants/contractors prior to obligation.*
 False
 True

Travel Policies*

Separation of financial duties*

Saving

42 Record retention

True ✕

Checking the Excluded Parties List system for suspended or debarred consultants/contractors prior to obligation.* ?

True ✕

Record retention*

True

False

True

Separation of financial duties* ?

Appropriate background screening*
Please visit [Suitability for Individuals Interacting with Participating Minors](#) for more information.

Employee Eligibility Verification*
Please visit [Employment Eligibility Verification](#) for more information.

Previous Next Sign and s

43 Travel Policies

True ✕

Checking the Excluded Parties List system for suspended or debarred consultants/contractors prior to obligation.* ?

True ✕

Record retention*

True ✕

False

Travel Policies*

Separation of financial duties* ?

Appropriate background screening*
Please visit [Suitability for Individuals Interacting with Participating Minors](#) for more information.

Employee Eligibility Verification*
Please visit [Employment Eligibility Verification](#) for more information.

Previous Next Sign and s

44 Separation of financial duties

True x

Checking the Excluded Parties List system for suspended or debarred consultants/contractors prior to obligation.* ?

True x

Record retention*

True x

Travel Policies*

True x

Separation of financial duties* ?

Appropriate background screening*
Please visit [Suitability for Individuals Interacting with Participating Minors](#) for more information.

Employee Eligibility Verification*
Please visit [Employment Eligibility Verification](#) for more information.

Previous Next Sign and s

45 Appropriate background screening

True x

Record retention*

True x

Travel Policies*

True x

Separation of financial duties* ?

True x

Appropriate background screening*
Please visit [Suitability for Individuals Interacting with Participating Minors](#) for more information.

False x

True x

Previous Next Sign and s

↔ Saving

46 Employee Eligibility Verification

Record retention*

True

Travel Policies*

True

Separation of financial duties*

True

Appropriate background screening*

Please visit [Suitability for Individuals Interacting with Participating Minors](#) for more information.

True

Employee Eligibility Verification*

Please visit [Employment Eligibility Verification](#) for more information.

False

True

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47 Click on "Capabilities and Competencies" tab

Services
y 23, 2025

20003-2141, US
63-1044781

Organization

MO Maria Oter
maria.oter@nca-online.org

FORM QUESTIONS

Complete the required fields below.
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Capabilities and Competencies

Audit/General Information

Please indicate what type of audit the applicant has had performed*

Single Audit

Date of Most Recent Single Audit or Audited Financial Statements*

Date should be fiscal year end and not date audit was conducted.

04/30/2025

On the most recent audit, what was the auditor's opinion?*

Unqualified Opinion

In the past three fiscal years, no "Materials Weakness" was disclosed.

48

Respond to: "Describe the experience and capability of your organization and any contractors that you will use to implement and manage this project and the associated Federal funding. Highlight previous experience managing Federal grants, including details on your system for fiscal accountability."

Draft on May 23, 2025

MO Maria Oter
maria.oter@nca-online.org

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...

Describe the experience and capability of your organization and any contractors that you will use to implement and manage this project and the associated Federal funding. Highlight previous experience managing Federal grants, including details on your system for fiscal accountability.*

Provide detailed description of the roles and responsibilities of project staff and explain your organizational structure and operations.*

Organizational Chart*
Please include a copy of an organizational chart showing how your organization operates, including who manages the finances and the management of the project proposed for funding.

Click or drop files here to upload
Maximum file size: 29MB

Accepted file types include: pdf

Saved

49

Respond to: "Provide detailed description of the roles and responsibilities of project staff and explain your organizational structure and operations."

FORM QUESTIONS

Complete the required fields below.
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Organization Information Pre Award Checklist Needs Statement Project Design & Implementa... Capabilities and Competenci...

Describe the experience and capability of your organization and any contractors that you will use to implement and manage this project and the associated Federal funding. Highlight previous experience managing Federal grants, including details on your system for fiscal accountability.*

jfdkjdfjlkasdfasd

Provide detailed description of the roles and responsibilities of project staff and explain your organizational structure and operations.*

Organizational Chart*
Please include a copy of an organizational chart showing how your organization operates, including who manages the finances and the management of the project proposed for funding.

Click or drop files here to upload
Maximum file size: 29MB

Accepted file types include: pdf

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50 Upload Organizational Chart in PDF here

FORM QUESTIONS Download

Complete the required fields below.
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Organization Information Pre Award Checklist Needs Statement Project Design & Implementa... Capabilities and Competenci... More


Describe the experience and capability of your organization and any contractors that you will use to implement and manage this project and the associated Federal funding. Highlight previous experience managing Federal grants, including details on your system for fiscal accountability.*

jfdkjdfjlkasdfasd 1 word

Provide detailed description of the roles and responsibilities of project staff and explain your organizational structure and operations.*

dfjlsdfkjksdfjfas 1 word

Organizational Chart*
Please include a copy of an organizational chart showing how your organization operates, including who manages the finances and the management of the project proposed for funding.


Click or drag files here to upload
Maximum file size: 29MB

Accepted file types include: pdf

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51 Click "More", if tabs are not visible.

Services
July 23, 2025

20003-2141, US
63-1044781

Organization

MO Maria Oter
maria.oter@nca-online.org

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Organization Information Pre Award Checklist Needs Statement Project Design & Implementa... Capabilities and Competenci... More


Describe the experience and capability of your organization and any contractors that you will use to implement and manage this project and the associated Federal funding. Highlight previous experience managing Federal grants, including details on your system for fiscal accountability.*

jfdkjdfjlkasdfasd 1 word

Provide detailed description of the roles and responsibilities of project staff and explain your organizational structure and operations.*

dfjlsdfkjksdfjfas 1 word

Organizational Chart*
Please include a copy of an organizational chart showing how your organization operates, including who manages the finances and the management of the project proposed for funding.



52 Click "Data Collection" tab

Services
July 23, 2025

20003-2141, US
63-1044781

Organization

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maria.oter@nca-online.org

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Describe the experience and capability of your organization and any contractors that you will use to implement and manage this project and the previous experience managing Federal grants, including details on your system for fiscal accountability.*

jfdkjdfjlkasdfasd 1 word

Provide detailed description of the roles and responsibilities of project staff and explain your organizational structure and operations.*

dfjlsdfkjksdfjfas 1 word

Organizational Chart*
Please include a copy of an organizational chart showing how your organization operates, including who manages the finances and the management of the project proposed for funding.

53 Respond to: "Describe the process for measuring project performance. Identify who will collect the data, who is responsible for performance measurements, and how the information will be used to guide and evaluate the impact of the project. Describe the process that will be used to accurately report data."

Management Services

FORM QUESTIONS Download

Complete the required fields below.
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Organization Information Pre Award Checklist Needs Statement Project Design & Implementa... Capabilities and Competenci... **Data Collection**

Describe the process for measuring project performance. Identify who will collect the data, who is responsible for performance measurements, and how the information will be used to guide and evaluate the impact of the project. Describe the process that will be used to accurately report data.*

Applicants that receive funding must provide regular performance data as defined by OJJDP that measures the results of the work carried out under the award. Note: Applicants are not required to submit performance data with their application.

Previous Next **Sign and s**

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54 Click "Budget" tab

ms
Services
July 23, 2025

921 PENNSYLVANIA AVE SE SUITE 313, WASHINGTON, DC, 20003-2141, US
63-1044781
organization

dustunderourfeet@gmail.com

MO Maria Oter
maria.oter@nca-online.org

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Organization Information Pre Award Checklist Needs Statement Project Design & Implementa... Capabilities and Competen... Data Collection More

Budget Other Required Attachments

Describe the process for measuring project performance. Identify who will collect the data, who is responsible for performance measurements, and how you will use the data to guide and evaluate the impact of the project. Describe the process that will be used to accurately report data.*

Applicants that receive funding must provide regular performance data as defined by OJJDP that measures the results of the work carried out under the award. Note: Applicants are not required to submit performance data with the application.

dfidksiflkasidfljsdalkif 1 word

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55 Enter in Requested Amounts in budget categories applicable to your scope of work and budget.

FORM QUESTIONS Download

Complete the required fields below.
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Organization Information Pre Award Checklist Needs Statement Project Design & Implementa... **Budget**

Budget

The applicant must include allowable costs in accordance with federal requirements and NCA guidelines. All proposed costs must occur within the grant period, are allowable, reasonable, and allocable to the specific goals and objectives of the proposed project. All requested expenditures must adhere to the latest edition of the DOJ Grants Financial Guide and 2 C.F.R Part 200.

Important:
***The cost of existing, ongoing or renewal software licenses/maintenance agreements is not an allowable cost. Only the cost associated with upgrades will be considered.
Extended warranties that go beyond the grant year will not be approved.

Personnel Amount

Fringe Benefits Amount

Travel Amount

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56

Respond to: "Personnel Outcomes/Workload/Output for time charged to NCA Award"

Indirect Costs
\$ 4,555

Total Grant Amount Requested*
Must not exceed maximum allowable for the grant category.
\$ 24,632.00

Personnel Outcomes/Workload/Output for time charged to NCA Award*
For each staff member included in Personnel, please describe a projected output, product or unit of service based on specific discipline (ex. # of children served; reduction in days on a waitlist; sessions conducted per week; # of FI interviews; # of MH assessments; # of professionals trained; etc.). Enter NA if no personnel requested.

Required Field (400-word max)

I certify that no grant funds will be used for Fundraising or Lobbying Activities.*
This input is required

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57

Click the "I certify that no grant funds will be used for Fundraising or Lobbying Activities." field.

Indirect Costs
\$ 4,555.00

Total Grant Amount Requested*
Must not exceed maximum allowable for the grant category.
\$ 24,632.00

Personnel Outcomes/Workload/Output for time charged to NCA Award*
For each staff member included in Personnel, please describe a projected output, product or unit of service based on specific discipline (ex. # of children served; reduction in days on a waitlist; sessions conducted per week; # of FI interviews; # of MH assessments; # of professionals trained; etc.). Enter NA if no personnel requested.

figldsjgkdjgkl

I certify that no grant funds will be used for Fundraising or Lobbying Activities.*
False
True

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The remaining slides display DTVF Specific Sections

58


Click "Needs Statement"

ms

4, 2025


Applicant Information

Manage applicants (1)



NATIONAL CHILDRENS ALLIANCE INC
921 PENNSYLVANIA AVE SE SUITE 313, WASHINGTON, DC,
20003-2141, US
63-1044781

Update organization



A L
dustunderourfeet@gmail.com

FORM QUESTIONS

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Organization Information Pre Award Checklist **Needs Statement** Project Design & Implementa... Capabilities and Competenci... More

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

Next **Sign and submit**

59 Respond to: "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

Applicants should briefly describe the nature and scope of the problem that the program will address (i.e., increase in victims of child CSAM/child sex trafficking victims). Applicants should also describe the effects on the target population and the larger community, any previous or current attempts to address the problem, including progress made through prior projects.*

[Previous](#)

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60 Respond to: "Applicants should briefly describe the nature and scope of the problem that the program will address (i.e., increase in victims of child CSAM/child sex trafficking victims). Applicants should also describe the effects on the target population and the larger community, any previous or current attempts to address the problem, including progress made through prior projects."

- 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

Applicants should briefly describe the nature and scope of the problem that the program will address (i.e., increase in victims of child CSAM/child sex trafficking victims). Applicants should also describe the effects on the target population and the larger community, any previous or current attempts to address the problem, including progress made through prior projects.*

[Previous](#)

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61 Click "Project Design & Implementation"

The screenshot shows the 'Applicant Information' section at the top, including the organization name 'NATIONAL CHILDRENS ALLIANCE INC' and the user profile 'A L dustunderourfeet@gmail.com'. Below this is the 'FORM QUESTIONS' section with a progress bar. The 'Project Design & Implementation' step is highlighted with an orange circle. The 'ABSTRACT' section below contains instructions and a list of required information: Purpose of the proposed project, Project activities to be performed, Expected outcomes, deliverables, or milestones of the proposed project, Service Area, and Intended beneficiary(ies) of the proposed project. A 'Download' button is visible in the top right of the form questions area.

62 If optional objective "to increase time and effort" is selected within the Core Service Provision focus area, click drop-down menu "Staffing Increase in Service Area 1" for a list of core services. Option to select an additional core service in Service Area 2 field.

The screenshot shows the 'Project Design & Implementation' step of the application form. A note at the top states: 'Please select only those objectives and outcomes that are relevant to your application scope of work and budget. It is recommended to choose only those objectives that can be fully completed during the award period and should be specific, measurable, achievable, relevant, and time-bound. Please keep in mind that choosing objectives does not necessarily make for a stronger application.' Below this is a section titled 'CSAM Core Service Provision' with the instruction: 'To increase staff and/or contractor time and effort in one or two of the following service area develop or expand CSAM/Sex-Trafficking CAC core service delivery:'. The 'Staffing Increase in Service Area 1' dropdown menu is highlighted with an orange circle. Below it are two input fields for 'Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.' The 'Staffing Increase in Service Area 2' dropdown menu is also visible. A 'Saved' button is located in the bottom left corner.

63

If Forensic Interview is selected: "Enter the estimated total number of CSAM forensic services to be conducted."

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 choose only those objectives that can be fully completed during the award period and should be specific, measurable, achievable, relevant, and time-bound. Please keep in mind that choosing more objectives **does not** necessarily make for a stronger application.

CSAM Core Service Provision

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1
Forensic Interview

Enter the estimated total number of CSAM forensic services to be conducted.*

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

Staffing Increase in Service Area 2

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

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64

If Forensic Interview is selected: "Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing."

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 choose only those objectives that can be fully completed during the award period and should be specific, measurable, achievable, relevant, and time-bound. Please keep in mind that choosing more objectives **does not** necessarily make for a stronger application.

CSAM Core Service Provision

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1
Forensic Interview

Enter the estimated total number of CSAM forensic services to be conducted.*

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

Staffing Increase in Service Area 2

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

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65

If Medical Services is selected: "Enter the estimated total CSAM medical exams/evaluations to be conducted."

Please select only those objectives and outcomes that are relevant to your application scope of work and budget. It is recommended to choose only those objectives that can be fully completed during the award period and should be specific, measurable, achievable, relevant, and time-bound. Please keep in mind that choosing more objectives does not necessarily make for a stronger application.

– CSAM Core Service Provision

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1

Medical Services

Enter the estimated total CSAM medical exams/evaluations to be conducted.*

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing. ⓘ

Staffing Increase in Service Area 2

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing. ⓘ

Emergency Support Services

66

If Medical Services is selected: "Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing."

Please select only those objectives and outcomes that are relevant to your application scope of work and budget. It is recommended to choose only those objectives that can be fully completed during the award period and should be specific, measurable, achievable, relevant, and time-bound. Please keep in mind that choosing more objectives does not necessarily make for a stronger application.

– CSAM Core Service Provision

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1

Medical Services

Enter the estimated total CSAM medical exams/evaluations to be conducted.*

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing. ⓘ

Staffing Increase in Service Area 2

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing. ⓘ

Emergency Support Services

67

If Mental Health is selected: "Enter the estimated total number of CSAM pre-screening assessments to be conducted."

Please select only those objectives and outcomes that are relevant to your application scope of work and budget. It is recommended to choose only those objectives that can be fully completed during the award period and should be specific, measurable, achievable, relevant, and time-bound. Please keep in mind that choosing more objectives does not necessarily make for a stronger application.

– CSAM Core Service Provision

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1

Mental Health

Enter the estimated total number of CSAM pre-screening assessments to be conducted.*

Enter the estimated total number of CSAM post-screening assessments to be conducted.*

Enter the estimated total number of evidence-based mental health treatments to be completed for CSAM/Sex Trafficking victims.*

Enter the anticipated total number of children/non-offending caregivers showing improvement after evidence-based treatment(s).*

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing. ?

68

If Mental Health is selected: "Enter the estimated total number of CSAM post-screening assessments to be conducted."

– CSAM Core Service Provision

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1

Mental Health

Enter the estimated total number of CSAM pre-screening assessments to be conducted.*

Enter the estimated total number of CSAM post-screening assessments to be conducted.*

Enter the estimated total number of evidence-based mental health treatments to be completed for CSAM/Sex Trafficking victims.*

Enter the anticipated total number of children/non-offending caregivers showing improvement after evidence-based treatment(s).*

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing. ?

Staffing Increase in Service Area 2

69

If Mental Health is selected: "Enter the estimated total number of evidence-based mental health treatments to be completed for CSAM/Sex Trafficking victims."

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1
Mental Health

Enter the estimated total number of CSAM pre-screening assessments to be conducted.*

Enter the estimated total number of CSAM post-screening assessments to be conducted.*

Enter the estimated total number of evidence-based mental health treatments to be completed for CSAM/Sex Trafficking victims.*

Enter the anticipated total number of children/non-offending caregivers showing improvement after evidence-based treatment(s).*

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

Staffing Increase in Service Area 2

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

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70

If Mental Health is selected: "Enter the anticipated total number of children/non-offending caregivers showing improvement after evidence-based treatment(s)."

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1
Mental Health

Enter the estimated total number of CSAM pre-screening assessments to be conducted.*

Enter the estimated total number of CSAM post-screening assessments to be conducted.*

Enter the estimated total number of evidence-based mental health treatments to be completed for CSAM/Sex Trafficking victims.*

Enter the anticipated total number of children/non-offending caregivers showing improvement after evidence-based treatment(s).*

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

Staffing Increase in Service Area 2

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

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71

If Mental Health is selected: "Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing."

To increase staff and/or contractor time and effort in one or two of the following service area develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1

Mental Health x

Enter the estimated total number of CSAM pre-screening assessments to be conducted.*

Enter the estimated total number of CSAM post-screening assessments to be conducted.*

Enter the estimated total number of evidence-based mental health treatments to be completed for CSAM/Sex Trafficking victims.*

Enter the anticipated total number of children/non-offending caregivers showing improvement after evidence-based treatment(s).*

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing. ?

Staffing Increase in Service Area 2

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing. ?

Saved

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72

If Multi-disciplinary Team is selected: "Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing."

Please select only those objectives and outcomes that are relevant to your application scope of work and budget. It is recommended to choose only those objectives that can be fully completed during the award period and should be specific, measurable, achievable, relevant, and time-bound. Please keep in mind that choosing more objectives **does not** necessarily make for a stronger application.

- CSAM Core Service Provision

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1

Multi-disciplinary Team x v

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing. ?

Staffing Increase in Service Area 2

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing. ?

Emergency Support Services

Enter the projected support services that will be offered and estimated number of individuals that will receive services.

73

If Victim Advocacy is selected: "Enter the estimated total number of victim advocacy services to be provided to CSAM/Sex Trafficking victims."

Please select only those objectives and outcomes that are relevant to your application scope of work and budget. It is recommended to choose only those objectives that can be fully completed during the award period and should be specific, measurable, achievable, relevant, and time-bound. Please keep in mind that choosing more objectives does not necessarily make for a stronger application.

- CSAM Core Service Provision

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1

Victim Advocacy

Enter the estimated total number of victim advocacy services to be provided to CSAM/Sex Trafficking victims.*

Enter the estimated total number of referrals to be provided to CSAM/Sex Trafficking victims.*

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

Staffing Increase in Service Area 2

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

74

If Victim Advocacy is selected: "Enter the estimated total number of referrals to be provided to CSAM/Sex Trafficking victims."

- CSAM Core Service Provision

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1

Victim Advocacy

Enter the estimated total number of victim advocacy services to be provided to CSAM/Sex Trafficking victims.*

Enter the estimated total number of referrals to be provided to CSAM/Sex Trafficking victims.*

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

Staffing Increase in Service Area 2

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

Emergency Support Services

75

If Victim Advocacy is selected: "Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing."

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1

Victim Advocacy

Enter the estimated total number of victim advocacy services to be provided to CSAM/Sex Trafficking victims.*

Enter the estimated total number of referrals to be provided to CSAM/Sex Trafficking victims.*

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

Staffing Increase in Service Area 2

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

Emergency Support Services

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76

If optional objective "Emergency Support Services" is selected: "Enter the projected support services that will be offered and estimated number of individuals that will receive services." in a list format.

Staffing Increase in Service Area 2

Enter the estimated percentage increase in CSAM/Sex Trafficking core services selected above that will result from the increase in staffing.

Emergency Support Services

Enter the projected support services that will be offered and estimated number of individuals that will receive services.

Other CSAM Core Service Objective

Other CSAM Core Service Objective

Option to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

77

If creating other core service objective, respond to: "Other CSAM Core Service Objective"

Other CSAM Core Service Objective

Other CSAM Core Service Objective ⓘ
Optional: enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

+ CSAM Service Delivery

+ CSAM Protocols & Guidelines

+ CSAM Specific Training

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.

78

If implementing more efficient delivery methods is selected within the Service Delivery focus area, respond to: "Describe the service delivery improvement to be implemented and the process and timeline for implementation."

- CSAM Service Delivery

To implement more efficient delivery methods to develop or expand CSAM-specific service delivery/capacity.

Describe the service delivery improvement to be implemented and the process and timeline for implementation.

Describe how the service delivery improvement will increase and/or improve services.

To implement or expand technology and systems to track and improve CSAM/Sex Trafficking case management, case review, and/or MDT participation and decision-making.

Describe the anticipated technology and systems that will be implemented or improved, their timelines, and how these will impact CSAM case management, case review, and/or MDT participation and decision-making.

79

If implementing more efficient delivery methods is selected within the Service Delivery focus area, respond to: "Describe how the service delivery improvement will increase and/or improve services."

- CSAM Service Delivery

To implement more efficient delivery methods to develop or expand CSAM-specific service delivery/capacity.

Describe the service delivery improvement to be implemented and the process and timeline for implementation.

Describe how the service delivery improvement will increase and/or improve services.

To implement or expand technology and systems to track and improve CSAM/Sex Trafficking case management, case review, and/or MDT participation and decision-making.

Describe the anticipated technology and systems that will be implemented or improved, their timelines, and how these will impact CSAM case management, case review, and/or MDT participation and decision-making.

80

If implementing or expanding technology & systems is selected within the Service Delivery focus area, respond to: "Describe the anticipated technology and systems that will be implemented or improved, their timelines, and how these will impact CSAM case management, case review, and/or MDT participation and decision-making."

To implement or expand technology and systems to track and improve CSAM/Sex Trafficking case management, case review, and/or MDT participation and decision-making.

Describe the anticipated technology and systems that will be implemented or improved, their timelines, and how these will impact CSAM case management, case review, and/or MDT participation and decision-making.

Other CSAM Service Delivery Objective

Other CSAM Service Delivery Objective ⓘ
Option to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

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81

If creating other service delivery objective, respond to: "Other CSAM Service Delivery Objective".

Other CSAM Service Delivery Objective

Other CSAM Service Delivery Objective ⓘ
Option to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

+ CSAM Protocols & Guidelines

+ CSAM Specific Training

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.

82

If establishing written protocols is selected within the Protocols & Guidelines focus area, respond to: "Describe the development of written protocols/guidelines, policies and procedures."

CSAM Protocols & Guidelines

Establish written protocols/guidelines for a coordinated CAC/MDT response specific to CSAM and child sex trafficking cases.

Describe the development of written protocols/guidelines, policies and procedures.
Protocols could include establishing an intake mechanism to identify CSAM cases, developing MDT & Service Provider roles/scope of expertise; information sharing; CSAM/Sex Trafficking investigation processes; risk factor review; referral process, etc.

Describe how you will develop or strengthen partnerships with key stakeholders including federal and local law enforcement, internet crimes task forces, and specialized service providers.

Other CSAM Protocol Objective

Other CSAM Protocol Objective ⓘ
Option to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

83

If establishing written protocols is selected within the Protocols & Guidelines focus area, respond to: "Describe how you will develop or strengthen partnerships with key stakeholders including federal and local law enforcement, internet crimes task forces, and specialized service providers."

- CSAM Protocols & Guidelines

Establish written protocols/guidelines for a coordinated CAC/MDT response specific to CSAM and child sex trafficking cases.

Describe the development of written protocols/guidelines, policies and procedures.
Protocols could include establishing an intake mechanism to identify CSAM cases, developing MDT & Service Provider roles/scope of expertise; information sharing; CSAM/Sex Trafficking investigation processes; risk factor review; referral process, etc.

Describe how you will develop or strengthen partnerships with key stakeholders including federal and local law enforcement, internet crimes task forces, and specialized service providers.

Other CSAM Protocol Objective

Other CSAM Protocol Objective ⓘ
Option to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

84

If creating other protocol objective, respond to: "Other CSAM Protocol Objective"

Other CSAM Protocol Objective

Other CSAM Protocol Objective ⓘ
Option to enter an objective not listed. Objective must directly state the activity that will be funded and the resulting outcome.

+ CSAM Specific Training

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.

85

If CSAM Specific Training is selected, respond to: "Enter the estimated total number of CSAM-specific trainings to be completed."

— CSAM Specific Training

Enter the estimated total number of CSAM-specific trainings to be completed. ⓘ
Training to develop CAC competencies in service provision to victims of CSAM and/or child sex trafficking.

86

If CSAM Specific Training is selected, respond to: "Enter the projected total number of unique professionals trained with grant funds."

— CSAM Specific Training

Enter the estimated total number of CSAM-specific trainings to be completed. ⓘ
Training to develop CAC competencies in service provision to victims of CSAM and/or child sex trafficking.

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.

87

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

CSAM Specific Training

Enter the estimated total number of CSAM-specific trainings to be completed. ⓘ
Training to develop CAC competencies in service provision to victims of CSAM and/or child sex trafficking.

88

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

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.

89

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.

Applicants must discuss plans for sustainability beyond the grant period.*


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Please select only those objectives and outcomes that are relevant to your application scope of work and budget. It is recommended to choose only those objectives that can be fully completed during the award period and should be specific, measurable, achievable, relevant, and time-bound. Please keep in mind that choosing more objectives does not necessarily make for a stronger application.

– CSAM Core Service Provision

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1
Victim Advocacy

Enter the estimated total number of victim advocacy services to be provided to CSAM/Sex Trafficking victims.*

91 Click "Other Required Attachments"

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Please select only those objectives and outcomes that are relevant to your application scope of work and budget. It is recommended that can be fully completed during the award period and should be specific, measurable, achievable, relevant, and time-bound. Please objectives does not necessarily make for a stronger application.

Other Required Attachments

CSAM Core Service Provision

To increase staff and/or contractor time and effort in one or two of the following service areas to develop or expand CSAM/Sex-Trafficking CAC core service delivery:

Staffing Increase in Service Area 1

Victim Advocacy

Enter the estimated total number of victim advocacy services to be provided to CSAM/Sex Trafficking victims.*

Enter the estimated total number of referrals to be provided to CSAM/Sex Trafficking victims.*

92 Upload Grant Budget & Timeline here

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File name should read: PROJECT BUDGET_ORG NAME

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UPLOAD: Your most recently completed audit (including Management Letter, if applicable)
File name should read: SINGLEAUDIT_ORG NAME

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
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
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
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
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Letters of Support/Memoranda of Understanding - Applicants should provide signed and dated letters of support or memoranda of understanding for all key partners that include the following: 1. Expression of support for the program and a statement of willingness to participate and collaborate with it. 2. Description of the partner's current role and responsibilities in the planning process and expected responsibilities when the program is operational.

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Goal(s): To support the development, expansion, or enhancement of the full array of CAC services to victims of child sexual abuse materials (CSAM)/child sex trafficking. To facilitate the development of written protocols/guidelines, policies and procedures for a coordinated CAC/MDT response specific to CSAM and child sex trafficking cases. To develop CAC competencies in service provision to victims of CSAM and/or child sex trafficking by focusing on CSAM-specific training.

Applicant Information Manage applicants (1)

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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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Letters of Support/MOUs
Letters of Support/Memoranda of Understanding - Applicants should provide signed and dated letters of support or memoranda of understanding for all key partners that include the following: 1. Expression of support for the program and a statement of willingness to participate and collaborate with it. 2. Description of the partner's current role and responsibilities in the planning process and expected responsibilities when the program is operational.

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