



WebGrants Application Walkthrough for Community and Faith-Based Organizations





2	SFA Tester Tester Site Visitor ASSIGNED - External,	shura	Funding Opportunities							
Ch	Dashboard	>		🔁 Print 🔻	Online 0	Help	G Log Out			
F	Funding Opportunities	>	≣ Curre	ently Posted	d Funding Op	portunit	es			
÷	Applications	>	All currently	posted opportu	inities appear belo	ow. The App	lication Deadline ind	licates the due date for the application submission.		
۲	Grants	>								
K	Reports	>	ID 🔻	Status 🔻 A	Agency 🔺	Program	Area 🔺	Title		
			2128	Test V	A DBHDS	Test Progr	am Area	Test - Phase 2 SFA Funding Opportunity		
*	My Profile	>	Showing 1 to 1	of 1 entries						

6793	Editing	Community and Faith-Based Organizations Mental Health Micro-
		Grants

6794 Editing Community and Faith-Based Organizations Substance Abuse Micro-Grants

- Login to WebGrants
- Click on Funding Opportunities on the left
- Click on either 6793 or 6794 to start the application, listed on this slide
- Remember to use the WebGrants Back button only to navigate back in the system



Funding Opportunity Details

? Ask a Question 🛛 Copy Existing Application

2128 - Test - Phase 2 SFA Funding Opportunity **Funding Opportunity Details Test Program Area** Final Application Deadline: Jun 23, 2023 12:53 PM Program Officer: Status: Test Click on Start New Award Amount Range: \$5.00 - \$5.000.00 Phone: Project Dates: 04/03/2023 - 09/29/2023 Email: **Application Button** Award Announcement Date: Once a New Application • SFA Tester is started, find it under Site Visitor ASSIGNED - External Applications (no need to Dashboard start another application) **Funding Opportunities** Applications Grants Reports My Profile

WebGrants Application Walkthrough

Application Initial Screen

Application Creation Wizard - Step: 1

- The Application creation process is a short wizard.
- Step 1: Enter your Application title and select your primary contact.
- Step 2: Select the Organization for which you will be submitting this Application
- · Step 3: This is an optional step. Select any additional contacts with which you would like to share your

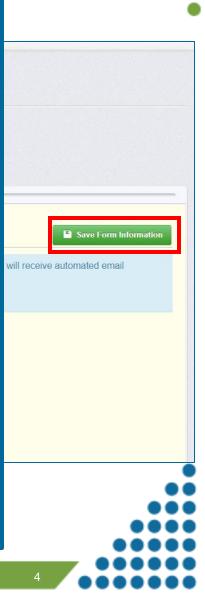
Application - General Information

The Primary Contact is the individual in your organization who will be designated as the primary personotifications when your attention is needed on this application.

Select the organization, if you belong to more than one, for which you will be submitting this applicat

Application Title*:	SFA Tester Grant Application_JHS_5_2_2023				
Primary Contact*:	SFA Tester				
Organization*:					
Additional Applicants*:					

Type in a title that will allow you to find it easily in the system Select the Primary Contact for the application & click Save Form Information button Then choose your organization & click Save Form Information Finally use the Additional Applicants drop down to choose all the people from your organization including your

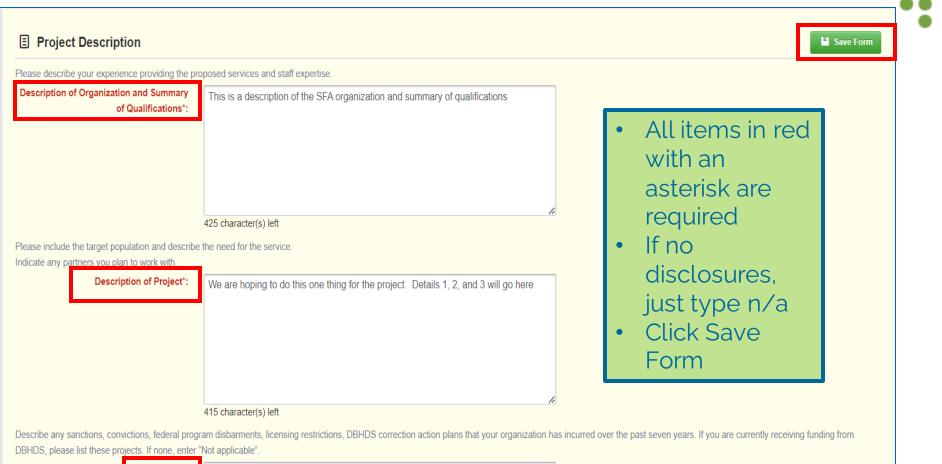


signatory

•



Status: Stage: Application Due Date: Program Area: Funding Opportunity: Organization: Requested Total: Application Preview Alert History Map Application Details		forr fille and cor the ma sub bar gre rea	the application ms must be ed in, saved d marked mplete before e Application by be omitted (red nd will turn to een when it is ady to be omitted)		
Component	Com	nplete?			
General Information Project Description		✓			
Project Description Project Outcomes Measures					
Budget Narrative					
Budget					
Single Audit Determination Inputs					



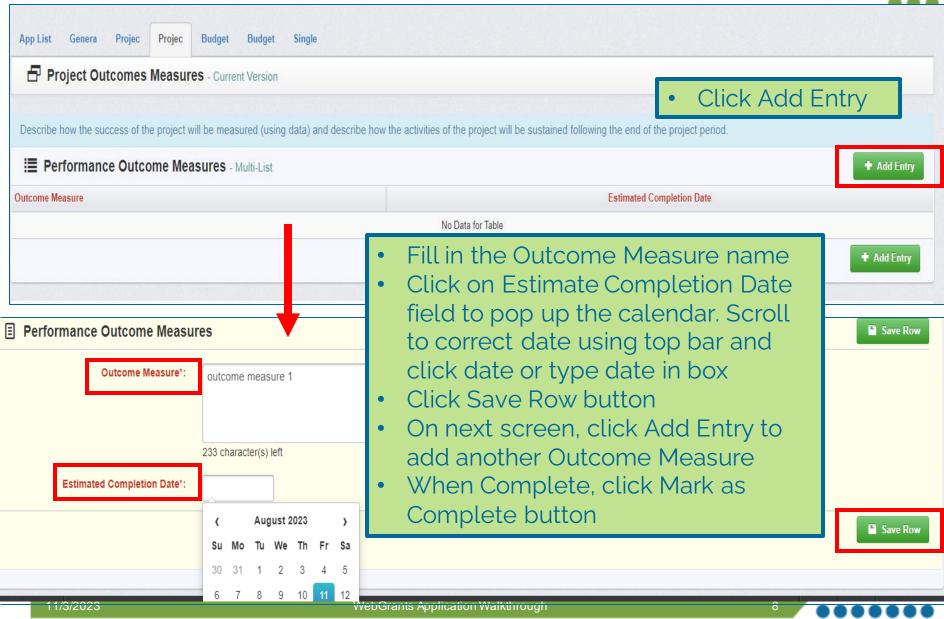
Disclosures*:

not applicable

DBHDS Project Description, Slide 1 of 2 ✓ Mark as Complete 🗹 Edit Form **Project Description** Please describe your experience providing the proposed services and staff expertise. Description of Organization and Summary Review the form after • of Qualifications*: This is a description of the SFA organization and summary of qualifications saving Please include the target population and describe the need for the service. Indicate any partners you plan to work with. If changes are need, • **Description of Project*:** click Edit Form We are hoping to do this one thing for the project. Details 1, 2, and 3 will go here Describe any sanctions, convictions, federal program disbarments, licensing restrictions, DBHDS correction action plans that your organization has incurred over the past seven year If complete, click Mark • projects. If none, enter "Not applicable" as Complete Disclosures*: not applicable Last Edited By: SFA Tester - May 2, 2023 9:02 AM Z Edit Form Attachments - Other Attachments ✓ Mark as Complete + Add New Attachment

•								
Description	File Name 🖸	Upload Date Delete						
No files attached.								
Last Edited By: SFA Tester - May 2, 2023 9:02 AM								







Forms are split into these sections:

Personnel Fringe Travel Equipment Supplies Contractual Construction Other Operating Costs

Ensure the budget line items are all included in the budget narrative Budget narrative provides details and examples for all required information



App List Genera Projec Budget Budget Single Budget - Current Version E Personnel Expenses - Multi-List E Personnel Expenses - Multi-List	 Review the specifics for each type of expenses Click Add Entry + Add Entry 							
	n, paid currently or accrued, for services of employees rendered during the period of performance under the Federal award. e separated from the salary or hourly wages and included in the below section. For additional information on allowablility please							
Description	Requested Amount							
No Data for Table								
	+ Add Entry							

Personnel Expe	nses					Save Row
				ervices of employees rendered during the period of performance under the Federal awa the below section. For additional information on allowablility please refer to 2 CFR 200.		
	Description*: Requested Amount*:	\$0	•	Fill in description Fill in Requested Amount		
			•	Click Save Row		Save Row
11/3/2023		We	ebGrants App	lication Walkthrough	10	



Budget Narrative Example

E Personnel	 Review Instructions and Example Click Edit Form
Name - Position Total Annual Salary (FTE) or \$/hr (Wage/PT) * Level of Effort (estimated % of costs) and Tr Justification for the budgeting the position on the award. Demonstrate the responsibilities of the Example Jane Doe, Ph.D., Principal Investigator 1.0 FTE Annual Salary \$60,000 @ 100% over 6 months = \$30,000 Dr. Doe will be responsible for the overall coordination and supervision of all aspects of the gran data management. In addition, she will conduct the orientation sessions, assist with statistical an Personnel:	position and how its function will contribute to the objectives of the federal grant.
E Personnel	Save Form
Name - Position Total Annual Salary (FTE) or \$/hr (Wage/PT) * Level of Effort (estimated % of costs) and T Justification for the budgeting the position on the award. Demonstrate the responsibilities of the Example Jane Doe, Ph.D., Principal Investigator 1.0 FTE Annual Salary \$60,000 @ 100% over 6 months = \$30,000 Dr. Doe will be responsible for the overall coordination and supervision of all aspects of the grad data management. In addition, she will conduct the orientation sessions, assist with statistical and the presonnel: Jane Doe, Ph.D., Principal Investigator 1.0 FTE Annual Salary \$60,000 @ 100% over 6 months = \$30,000 Dr. Doe will be responsible for the overall coordination and supervision of all aspects of the grad data management. In addition, she will conduct the orientation sessions, assist with statistical and the presonnel: Jane Doe, Ph.D., Principal Investigator 1.0 FTE Annual Salary \$60,000 @ 100% over 0. Dr. Doe will be responsible for the overall of the grant. This includes hiring, training.	 Fill in the text box with Narrative information; include all items in the box for this expenditure type Click Save From



Subrecipient Organization Information

🗹 Edit Form

Include information for the Subrecipient Organization and Representative that will be signing the Single Audit Determination contract, if the your organization is awarded the Grant.

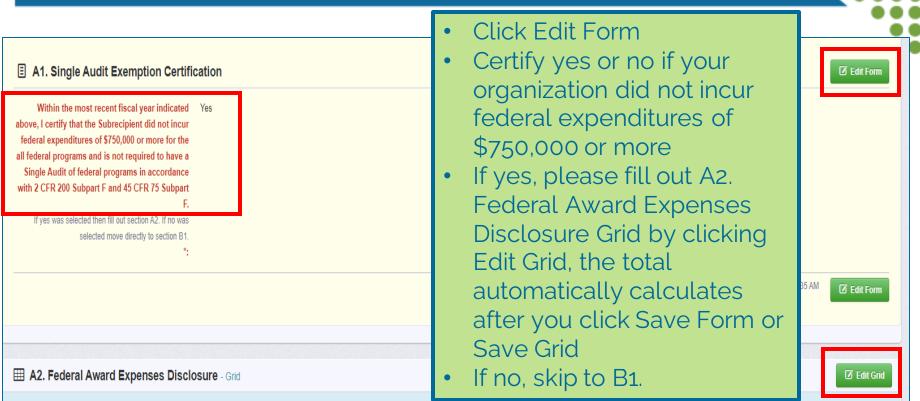
The Organization Representative should be the name of the contract signatory.

Organization Representative*:	Mr. Big
Organization Representative Title*:	CEO
Organization Representative Email*:	ceo@myorg.com
Organization Representative Telephone:	999-999-9999
Organization Representative Fax:	888-888-8888
ude the end date of the Organization's Fiscal Year as mm	/dd/yyyy.
Most Recent Fiscal Year End Date of the	06/30/2023
Organization*:	
Organization Representative Telephone: Organization Representative Fax: ude the end date of the Organization's Fiscal Year as mm. Most Recent Fiscal Year End Date of the	999-999-9999 888-888-8888 /dd/yyyy.

- Click Edit Form
- Please use the person's information who will be signing the contract from your organization
 - IMPORTANT NOTE for the A1 and B1 sections of this form: you **must** fill in yes on one section and no on the other. Whichever one you choose yes; the second section must be filled in (i.e., A1 is yes then A2 completed). If you do not do this your application will be negotiated back to you for further edits and this will delay your application being reviewed

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Single Audit Determination, 2 of 3 slides

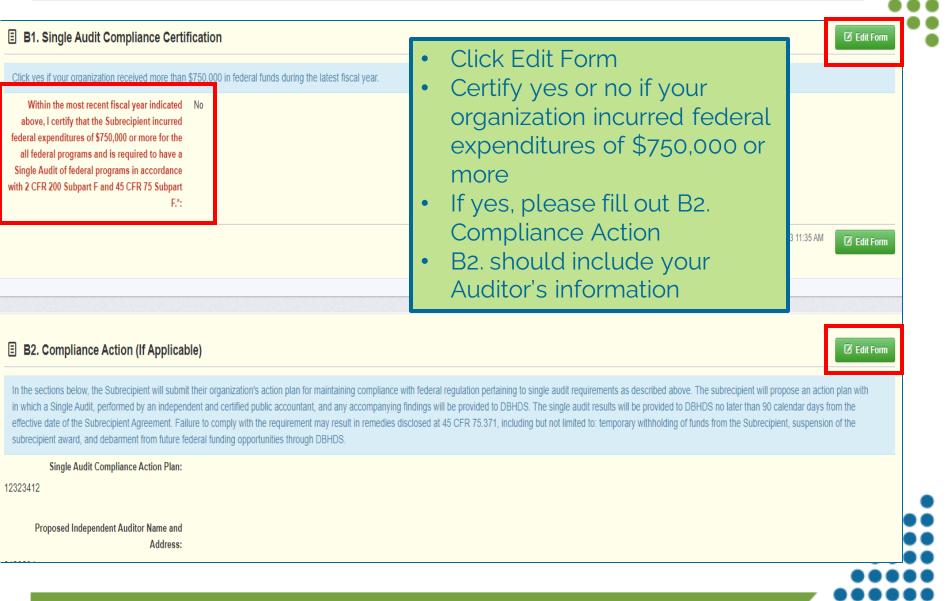


If your agency expended less than \$750,000 for all federal programs, please complete the following table for all federal programs where expenditures were incurred:

Row	Federal Awarding Agency	Pass Through Entity (if applicable)	Pass Through Entity Unique Entity Identifier	Subrecipient Entity Subaward Number	CFDA#	Total Expenditures incurred during the fiscal year
1	deo	hjk	789	567	123	\$10.00
2	dca	hjk	780	345	123	\$10.00
3	fdr	hjk	790	123	123	\$10.00
Total						\$30.00



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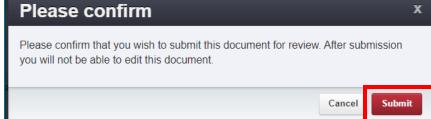




Daviawar Crantaa Cantrad Dianatura	2142 - SFA Tester Grant Application_JHS_5_2_2023	Once all the forms are marked				
Dashboard > Funding Opportunities > Applications > Grants > Reports >	Status:EditingStage:Final ApplicationApplication Due Date:Jun 23, 2023 12:53 PMProgram Area:Test Program AreaFunding Opportunity:2128-Test - Phase 2 SFA Funding OpportunityOrganization:BaseLine OrganizationRequested Total:\$5,000.00	 complete, note in green will show that the Application is ready for Submission Click the Submit Application to send the application to DBHDS for Review 				
My Profile	Application Preview Alert History Map					
	Application Details	Q Preview Application 🖌 Submit Application ? Ask a Question 🗙 Withdra				
	Application is in compliance and is ready for Submission!					
	Component Comp	lete? Last Edited				
	General Information	May 2, 2023 8:59 AM - SFA Tester				
	Project Description	May 2, 2023 9:02 AM - SFA Tester				
	Project Outcomes Measures					
	Budget Narrative	May 2, 2023 10:04 AM - SFA Tester				

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- Click Submit on the Please Confirm pop up box to submit the Claim
- Claim will show in Submitted Status on the Applications Tab



SFA Tester Tester Site Visitor ASSIGNED - External, Docimumor, Condern Content Standard		List of all current submitted applications									
CA Dashboard	>		🔁 Print 🔹	Online Help	[→ Log Out						
Funding Opportunities	>	Current App	Current Applications Archived Applications								
📩 Applications	>	i≣ Curre	I Current Applications								
③ Grants	>		The applications below are associated with recent Funding Opportunities and are in Editing, Submitted, or Correcting statuses. To view older applications, click on the Archived Applications link.								
🗠 Reports	>								Search:		
A My Profile	>	ID = State	us 🕆 Stage	Title		Organization	Program Area	Funding Opportunity		Due Date 🔻	
		2142 Subm	nitted Final Appl	cation SFA Tester Gra	nt Application_JHS_5_2_2023	BaseLine Organization	TPA-Test Program Area	2128-Test - Phase 2 SFA Funding Opportu	nity (Test)	Jun 23, 2023 12:53 PM	
		Showing I to T	or r entries								



- Review the DBHDS Website for more information on Grants: <u>www.dbhds.virginia.gov/grants</u>
- Reach out to <u>webgrants@dbhds.virginia.gov</u> with any questions on registering in the DBHDS WebGrants System



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