**Administrative Office of the Courts**

**Office of Problem-solving Courts**

**187 Harry S. Truman Parkway**

**Annapolis, MD 21401**

**Fo: FO-2026-PSC-009**

**Grant Application Cover Sheet**

**Applicant Organization Name**:

**Office/Department/Unit (if applicable)**:

**Program Name (if different):**

**Address**: **City**: **State:** **ZIP**

**Federal Employer Identification Number (FEIN): SAM Unique Entity ID (if applicable):**

**Amount Requested:**  **Matching Funds (if applicable):**

|  |  |  |  |
| --- | --- | --- | --- |
| **Applicant Organization Personnel** | **Name** | **Phone Number** | **Email** |
| Administrative Judge/ Organization Director: |  |  |  |
| Court Administrator/ Administrative Clerk: |  |  |  |
| Project Manager: |  |  |  |
| Project Finance Manager: |  |  |  |

|  |  |
| --- | --- |
| **Authorizing Signatures** By signing below, the applicant agrees to abide by all terms of the Judiciary’s General Grant Conditions as well as the terms of the **FY2026 Special Conditions for Problem-Solving Courts (PSC) Discretionary Grant.** | |
| **Director/Administrative Authority:** | **Financial Authority:** |
|  |  |
| *Printed Name* | *Printed Name* |
|  |  |
| *Title* | *Title* |

*Signature Date Signature Date*

Please compile the application into one PDF document and submit the application via email to: [OPSC.grants@mdcourts.gov](mailto:OPSC.grants@mdcourts.gov) by March 21, 2025.

**Administrative Office of the Courts**

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**187 Harry S. Truman Parkway**

**Annapolis, MD 21401**

**Problem-Solving Courts Discretionary Grant Application**

**Checklist**

This checklist is intended as a tool to assist applicants to submit complete and timely applications. This checklist does not need to be submitted with your application.

\_\_\_\_ Grant Application Cover Sheet

Signed by BOTH the Director/Administrative Authority and Financial Authority

\_\_\_\_ Program Narrative and Budget Justification – Within each budget category, do not exceed 350 words per item.

\_\_\_\_ Use the standard set margins, New Times Roman, Font 12.

\_\_\_\_ Signed/Scanned PDF application

\_\_\_\_\_ Emailed to: [OPSC.grants@mdcourts.gov](mailto:OPSC.grants@mdcourts.gov)

Subject Line: **“PSCDGFY26 - County Name and Court Type”**

\_\_\_\_ Application Deadline – March 21, 2025

Failure to respond to any of the items or submitting late applications may result in the

Office of Problem-Solving Courts rejecting or delaying the award.

Any questions concerning the submission of this application should be directed to:

Brenda Stansbury, OPSC

(410) 260-3615

Or email questions to [OPSC.grants@mdcourts.gov](mailto:OPSC.grants@mdcourts.gov)

**Grant Application Narrative**

**Summary of the Budget Request: Please briefly summarize your proposed project.** (**50 words or less**) The summary will be incorporated into the Budget Request Award & Acceptance Form and other documents.

**Program Narrative and Budget Justification**

**Using these charts, please provide a summary of your current and previous Problem-Solving Court Grant.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Detail** | **FY 2023** | **FY 2024** | **1st Half – FY 2025** |
| Grant Award |  |  |  |
| Total Spent |  |  |  |
| % Spent |  |  |  |

**Funding from Non-Judiciary Resources (For All Programs Under This Grant)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FY 2024 – Previous** | | | **FY2025 Current** | | |
| **Grantor** | **Award Amount** | **Purpose** | **Grantor** | **Award Amount** | **Purpose** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Complete Sections 1, 2, 3, 4, and 5 for each Problem-Solving Court under this grant (where applicable).**

**Problem-Solving Court Type:**

**1. Previous and Projected Program Capacity**

|  |  |  |  |
| --- | --- | --- | --- |
| **FY 2023** | **FY 2024** | **FY 2025** | **FY 2026 Projected** |
|  |  |  |  |

**2. Current Active Client Count (As of December 31, 2024)**

**3. Explain any deviations in stated Program Capacity vs Active Client Count.**

**4. Client Demographics for Active Clients**

Include a comprehensive summary of client demographic data for the reporting period. At a minimum, this information must include:

* Race
* Sex
* Ethnicity
* Age

This data is critical for understanding the composition of individuals served by the court and for assessing program effectiveness and equity.

**5. What innovation will you implement this year that will help you meet or exceed your target population?**

**Goals, Objectives, Measurable Outcomes (Applicable to All Programs Under This Grant))**

Applicants must outline 4-5 program goals, ensuring alignment with the grant’s purpose. At least two goals must focus on **training/professional development** and **community outreach**. The remaining goals should address practices specific to Problem-Solving Courts, with a minimum of two additional goals required.

Each goal must include clear objectives and measurable outcomes, providing a framework for tracking progress. Problem-Solving Courts will be responsible for demonstrating measurable advancements toward achieving the stated goals.

This section must address all programs supported by the grant, where applicable.

**Training/Professional Development**

Required

**Community Outreach**

Required

**Program Selected Goals, Objectives, Measurable Outcomes**

**FY 2026 Budget with Justification**

This section should include a line-item budget and justification. Each requested product/service/position justification should be no longer than 350 words per item. At a minimum, include the following:

* How much funding for this position/item/service is needed and for what?
* Cost Itemization.
* When are the resources needed?
* What AIMS data or other statistical background was used to justify the request?
* What steps have previously been taken to secure resources (i.e., federal grants, donations, fundraisers, etc.)?

The following are definitions for each line item listed in the FY 2026 Office of Problem-Solving Courts Discretionary Grant:

**Personnel -** List each position by title, including the annual salary rate and the percentage of time allocated to the project. Compensation for employees engaged in grant-funded activities must align with the rates paid for similar work within your organization. Include only positions within the applicant organization; grant-funded positions outside the applicant organization should be detailed under the Consultants/Contracts category.

*Benefits and Payroll Taxes* – Provide benefits and payroll tax costs based on actual expenses or an established formula, limited to the percentage of time devoted to the project. Salary adjustments for grant-funded circuit court employees will be aligned with those appropriated by the legislature for state Judiciary positions. Fringe benefits supported by the grant will adjust accordingly to reflect any salary changes.

Local governments may supplement salaries and fringe benefits beyond the amounts provided through the grant, if desired.

**Consultant/Contracts** - Provide a detailed description of the product or service to be procured through a contract, including an estimate of the associated costs. These services should address needs that cannot be met by full- or part-time project staff. Typically, contracted services result in a specific, identifiable product or deliverable.

All procurement activities must comply with applicable standards and regulations for advertising and soliciting potential service providers.

**Equipment** - Provide a list of nonexpendable items to be purchased. Nonexpendable equipment is defined as tangible property with a useful life exceeding one year and an acquisition cost of $100 or more per unit. (For items costing less than $100, an organization’s capitalization policy may apply.) Expendable items should be categorized under "Supplies."

Evaluate the cost-effectiveness of purchasing versus leasing equipment, particularly for high-cost items or those subject to rapid technological advancements. Costs associated with rented or leased equipment should be included under the "Contractual" category.

Clearly explain the necessity of each equipment item and its role in achieving the project’s objectives.

**Supplies** – Provide a detailed list of costs required to support the project. Supplies are defined as expendable materials with a useful life of less than one year or an acquisition cost of less than $100 per unit. This category typically includes items that are consumed or depleted during the course of the project.

**Travel** – Itemize travel expenses for project personnel, detailing the purpose (e.g., staff attending coordinator meetings or site visits). Provide a breakdown of costs, including the number of travelers, duration, and associated expenses (e.g., airfare, lodging, meals). If known, specify the travel locations.

**Training** – Itemize training expenses for project personnel, specifying the purpose and scope (e.g., staff participation in professional development sessions or certifications). Include details on registration fees, materials, and associated costs. If applicable, outline calculations and provide specific examples. If known, specify the training type.

**Other Direct Costs** – Not applicable to OPSC Applicants.

**Indirect Costs** - Not applicable to OPSC Applicants

**Personnel**

**Position Type:**

**How many years has OPSC funded this?**

**Is this position currently filled?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** | **2024** | **1st half 2025** | **2026 Request** |
| **Awarded** |  |  |  |
| **Spent** |  |  |  |
| **% Spent** |  |  |  |

* **How much funding for this position is needed and for what?**
* **Cost Itemization**
* **When is the staff needed?**
* **What AIMS data or other statistical background were used to justify the request?**
* **What steps have previously been taken to secure resources (i.e., federal grants, donations, fundraisers, etc.)?**

**Contracts and Consultants**

**Service Type:**

**How many years has OPSC funded this?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** | **2024** | **1st half 2025** | **2026 Request** |
| **Awarded** |  |  |  |
| **Spent** |  |  |  |
| **% Spent** |  |  |  |

* **How much funding for this service is needed and for what?**
* **Cost Itemization:**
* **When are the resources needed?**
* **What AIMS data or other statistical background were used to justify the request?**
* **What steps have previously been taken to secure resources (i.e., federal grants, donations, fundraisers, etc.)?**

**Supplies**

**Supply Type:**

**How many years has OPSC funded this?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** | **2024** | **1st half 2025** | **2026 Request** |
| **Awarded** |  |  |  |
| **Spent** |  |  |  |
| **% Spent** |  |  |  |

* **How much funding for this item/service is needed and for what?**
* **Cost Itemization:**
* **When are the resources needed?**
* **What AIMS data or other statistical background were used to justify the request?**
* **What steps have previously been taken to secure resources (i.e., federal grants, donations, fundraisers, etc.)?**

**Equipment**

**Equipment Type:**

**How many years has OPSC funded this?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** | **2024** | **1st half 2025** | **2026 Request** |
| **Awarded** |  |  |  |
| **Spent** |  |  |  |
| **% Spent** |  |  |  |

* **How much funding for this item/service is needed and for what?**
* **Cost Itemization:**
* **When are the resources needed?**
* **What AIMS data or other statistical background were used to justify the request?**
* **What steps have previously been taken to secure resources (i.e., federal grants, donations, fundraisers, etc.)?**

**Training**

**Training Type:**

**How many years has OPSC funded this?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** | **2024** | **1st half 2025** | **2026 Request** |
| **Awarded** |  |  |  |
| **Spent** |  |  |  |
| **% Spent** |  |  |  |

* **How much funding for this is needed and for what?**
* **Cost Itemization:**
* **When are the resources needed?**
* **What steps have previously been taken to secure resources (i.e., federal grants, donations, fundraisers, etc.)?**

**Travel**

**Travel Type:**

**How many years has OPSC funded this?**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** | **2024** | **1st half 2025** | **2026 Request** |
| **Awarded** |  |  |  |
| **Spent** |  |  |  |
| **% Spent** |  |  |  |

* **How much funding for this is needed and for what?**
* **Cost Itemization:**
* **When are the resources needed?**
* **What steps have previously been taken to secure resources (i.e., federal grants, donations, fundraisers, etc.)?**