# Veterans Service Officer Grant Program – FY 2025-26 Instructions for Completing the VSO Grant Application

# **DEADLINE:** February 17, 2025, by 2 p.m.

### Important things to remember:

- □ All sections and fields of the application must be complete. Type responses; do not hand write.
- □ The organization may attach additional detailed documents, but these do not relieve the organization from the requirement to complete *all* sections of the application form.
- □ A signed application and all attachments must be submitted digitally to RA-MVDMVAGrants@pa.gov.
- Grant applications *must* be received by the deadline to be considered. Applications received after the deadline will be administratively rejected.
- □ Organizations should review the VSO Grant Request For Applications when completing this application.

### Required components of the application:

### Section A: Organizational Information

□ Complete all required sections. Type directly into the application form.

### Section B: Applicant for Grant

- □ Complete all required sections. Type directly into the application form.
- □ *Note*: The figure entered for the <u>amount requested</u> through this program should match the figure entered for <u>Total Expenditures Planned Using Grant Funds</u> for period beginning July 1, 2025, and ending June 30, 2026.

# Section C: Spending Plan and Program Budget

- □ Use the forms in this section to include a spending plan and program budget that show how the organization will spend the grant as provided by law. Only include anticipated costs.
  - For example, if the Veteran Service Officer the organization currently employs does not require health benefits, do not include that cost in the spending plan.
- Grant funds shall be used only to support accredited VSO(s) and the associated costs, which are limited by law to:
  - Wages, benefits, other compensation and related personnel costs.
  - Training provided by accredited veterans' service advocacy staff.
  - Equipment to be used by accredited veterans' service officer staff.
- □ Type directly into the application forms. Attach additional pages *only* if necessary.

### Section D: Attachments

# Attachment 1: Program Narrative

 Explain how the organization will use the requested grant funds allocated to accomplish the program goals and project priorities as outlined on pages 5 and 10 of the FY 2025-26 Request for Applications.

# Attachment 2: Past Performance

Include a description, utilizing the questions found in the application, to describe how your organization has accomplished VSO program functions in the past, as stated in the VSO Program Guidelines. This will provide information described in the statute and provide a

baseline for future applications.

### Attachment 3: Past Project Audit

□ Provide a copy of the veterans service organization's VSO grant project audit for the preceding grant activity period.

### Attachment 4: IRS FORM W-9

- □ Complete and submit IRS Form W-9 as an attachment.
- □ This form can be found at <u>http://www.irs.gov/</u>.

### Applications must be submitted digitally to: RA-MVDMVAGrants@pa.gov.

Applications must be received before the deadline: February 17, 2025, at 2 p.m.

# Veterans Service Officer Grant Program – FY 2025-26 VSO Grant Application

**Directions**: Complete all sections. Type answers into text fields.

# Section A. Organizational Information

- Organization Name:
- Organization Commander:
- Organization Adjutant (or Executive Director):
- Organization Address:
- Organization Phone:
- Organization Email:
- Pennsylvania State Veterans Commission Member (Click One): 
  UYes 
  No
- Organization Employer Identification Number (EIN):
- Organization SAP Vendor Number:

### For Official Use

Received By:

Date:

# Section B. Application for Grant

On behalf of	, I hereby apply for a grant in the amount of
\$pursuant to 51 H	Pa. C.S. § 9304 (related to grants to veterans service officer programs) as
amended. It is understood that the Penn	nsylvania Department of Military and Veterans Affairs (DMVA) will
review this grant application and deter	mine the amount of the grant funds to be disbursed. Once the grant funds
are approved,	and DMVA will execute a grant agreement (contract).
No grant funds will be paid or expende	ed until after the beginning of the grant activity period (as described in
the Grant Agreement). The grant is use	ed solely for purposes authorized by law as more fully described in the
FY 2025-26 Spending Plan and Program	m Budget, which is included as part of this application. I hereby certify
that the information submitted with thi	s application is true and correct to the best of my knowledge,
information, and belief. I further certify	y, on behalf of,
any grants awarded to the organization	are used for the purposes described in this application and approved by
DMVA. I further certify that I am authority	orized to sign this application on behalf of the applicant.

Signature:	

Date:

Name:			

Title:

# Section C. Spending Plan and Program Budget

**Part 1 Directions:** Show how you plan to spend the grant as provided by law. Type directly into the tables below. (Attach additional sheets if necessary.)

Reminder: This grant shall be used solely to support accredited veterans service officers and the associated costs, including:

- Wages, benefits, other compensation and related personnel costs
- Training provided by accredited veterans service advocacy staff
- Equipment to be used by accredited veterans service officer staff

COSTS DURING GRANT PERIOD (July 1, 2025 – June 30, 2026)							
Name of Accredited Veterans Service Officer	Location & Contact Number	Hrs/Wk	Wages	Benefits	Training	Equipment	TOTAL

OTHER PERSONNEL IN SUPPORT OF ACCREDITED VETERANS SERVICE OFFICER(S) DURING GRANT PERIOD (July 1, 2025 – June 30, 2026)							
Name of Accredited Veterans Service Officer	Location & Contact Number	Hrs/Wk	Wages	Benefits	Training	Equipment	TOTAL
<b>NOTE:</b> For any personnel of support the functions of the		ther than the acci	redited veterans s	service officers, p	provide a descrip	tion of how those	e costs will

**Part 2 Directions:** List all planned expenditures from the grant (other than personnel and related costs shown on the preceding pages) for the period from July 1, 2025, through June 30, 2026, and describe how they will support the VSO Grant program goals. Type directly into the tables below. (Attach additional sheets if necessary.)

#	Item Description	How This Item Will Support VSO Goals	Cost
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			

-		
17		
18		
19		
20		
21		
22		
23		
24		
25		
26		
27		
28		
29		
30		

Total expenditures planned using grant funds for grant activity period beginning July 1, 2025, and ending June 30, 2026:

**Part 3 Directions:** Describe the overall program budget for the organization's VSO Program. Type directly into the tables below. (Attach additional sheets if necessary.)

INCOME					
Source of Funds	Current Year	Grant Year	Future Year		
VSO Grant Program (Requested)					
Organization Operating Budget					
Organization National Headquarters					
Other:					
TOTAL					

EXPENDITURES						
Category of Expenses	Current Year	Grant Year	Future Year			
Personnel – Salary & Wages						
Personnel – Benefits						
Personnel – Training						
Personnel – Travel & Related Costs						
Personnel – Other:						

Personnel – Other:		
Personnel – Other:		
Operating – Supplies		
Operating – Equipment		
Operating – Rent		
Operating – Utilities		
Operating – Other:		
Operating – Other:		
Operating – Other:		
Fixed Assets (items costing \$5,000+):		
Fixed Assets (items costing \$5,000+):		
Fixed Assets (items costing \$5,000+):		
Fixed Assets (items costing \$5,000+):		
Fixed Assets (items costing \$5,000+):		
TOTAL		

Contact person who can provide information regarding the spending plan and program budget:

Name:

Phone:

E-mail:

# Section D. Required Attachments

### **Attachment 1: Program Narrative**

**Directions:** Provide written responses to the following prompts.

- □ The responses shall include how the VSO grant program goals will be met and how the applying organization will increase the number of veterans applying for federal, state, and local veteran benefits. See the FY 2025-26 Request For Applications for details on program goals and project priorities.
- □ The narrative section may *not* be more than 30 pages. It must be double-spaced and utilize Times New Roman font, size 12, with one-inch margins.

### **Required Prompts**

- I. Describe your organizational process and outreach efforts for assisting the general veteran population, as well as diverse and special veteran populations. Diverse and special veteran populations include, but not limited to, Post 9/11, elderly (60+), incarcerated, and women veterans.
- II. Describe how your organization will incorporate the availability of emergency grants through the Veterans Temporary Assistance (VTA) and the Military Family Relief Assistance Fund (MFRAP) into its VSO program. Include efforts your organization will make to increase awareness and utilization of VTA and MFRAP.
- III. Describe how your organization will increase the veteran community's awareness of state veterans programs, including but not limited to, the APVP, BVP, EG, VTA, and RETX programs. Additionally, describe how your organization will support veterans with the development and submission of claims or applications for these state programs.
- IV. Describe how your organization will collaborate with DMVA and County Directors of Veterans Affairs to address the needs of the veterans that your organization serves.
- V. Describe your organization's internal controls that are designed to prevent fraud, waste, abuse, conflicts of interest, and the appearance of impropriety related to funding provided through this grant.
- VI. Describe how your organization will ensure that veterans you interact with participate in customer service satisfaction surveys. Specify the methods your VSOs and other staff will use to ensure a response rate of at least 25% from veterans and eligible dependents contacted through virtual, electronic, or in-person means. Outline the process for maintaining contact with clients while actively addressing their needs and gathering feedback on customer satisfaction. Detail the steps your organization will take to respond to poor customer satisfaction ratings and negative comments from the surveys.
- VII. Describe all relevant training, beyond continuing education requirements (e.g., state veterans program training) that your organization will require its VSOs to obtain or maintain. This relevant training should include topics such as how to effectively process

applications for benefits related to military sexual trauma, post-traumatic stress, depression, anxiety, substance abuse, and other mental health issues.

- VIII. Describe your organization's quality assurance plan and how it will ensure that claims are submitted accurately and timely. Specify the quality assurance process and include how often quality assurance checks are completed. Include how claims are monitored to prevent lengthy processing times and how applicants are apprised of the status of their claim.
- IX. Describe in detail your organization's experience with appeals to decisions issued by the USDVA, specifically when a veteran or eligible dependent disagrees with the USDVA determination. Include a description of your organization's review of Statements of the Case from the USDVA regarding denials of claims and how your organization would assist veterans with the preparation of responses. Also describe your organization's experience assisting and representing veterans, either virtually or in person.
- X. Describe in detail your organization's spending plan and program budget. Include a justification that supports the requested amount of grant funding. Explain in detail how the organization's projected costs are calculated and detail how those costs are directly related to the program's goals. Explain how and why each line-item in the proposed budget meets the program deliverables. Explain how all costs will be used to provide assistance and/or programing that meets the needs of veterans. The proposed costs must be reasonable, allocable, and necessary for the supported activity.

#### **Attachment 2: Past Performance**

**Directions:** Provide a written description about how your organization has accomplished VSO program functions in the past based on the VSO program goals and project priorities. See the FY 2025-26 Request For Applications for details on program goals and project priorities.

- □ If the applying Veterans Service Organization received a VSO grant the previous year, describe how it was expended.
- □ The written submission must be double-spaced and utilize Times New Roman font, size 12, with one-inch margins.

#### **Attachment 3: VSO Project Audit**

Directions: A copy of the veterans service organization's project audit for the preceding grant activity period.

#### Attachment 4: IRS Form W-9

Directions: Complete, attach, and submit IRS Form W-9, available at https://www.irs.gov.