



COMMONWEALTH of VIRGINIA

Department of Criminal Justice Services

Shannon Dion
Director

Megan Peterson
Chief Deputy Director

Washington Building
1100 Bank Street
Richmond, Virginia 23219
(804) 786-4000
www.dcjs.virginia.gov

June 4, 2020

Mr. R. Cellell Dalton
Interim County Administrator
Carroll County
605-1 Pine Street
Hillsville, VA 24343

RE: School Resource Officer/School Security Officer Grant Program--SSO

Dear Mr. Dalton:

Congratulations on being a recipient of the above referenced grant program! Your DCJS grant award number is **21-B4748FR21** and was approved for a total award of **\$35,000**. The project period is **07/01/2020** through **06/30/2021**.

Included with this letter is a Statement of Grant Award/Acceptance (SOGA). Please note hard copies of the General Special Conditions, as well as the Reporting Requirements and Projected Due Dates, are no longer included as part of the Grant Award Package. Instead, these documents have been combined and are now referred to as **Conditions and Requirements** and are posted online at <https://www.dcjs.virginia.gov/grants/grant-requirements>.

In addition to the General Special Conditions, there may be Specific Special Conditions related to your Grant Award. You are required to view these conditions online via the Grants Management Information System (GMIS) at <https://grants.dcjs.virginia.gov> under menu item View Status -> Special Conditions. If you have not previously done so, you must obtain a user name and password set up by your Finance Officer in order to use this web-based system.

We will be happy to assist you in any way we can to assure your project's success. To indicate your acceptance of the award and conditions, please sign the included SOGA and return it electronically within the next 60 days to grantsmgmt@dcjs.virginia.gov. If you have questions, contact (Michelle Miles) at (804) 225-1846 or via email at Michelle.Miles@dcjs.virginia.gov.

Sincerely,

A handwritten signature in cursive script that reads "Shannon Dion".

Shannon Dion

STATEMENT OF GRANT AWARD (SOGA)

Virginia Department of Criminal Justice Services
1100 Bank Street, 12th Floor
Richmond, Virginia 23219

School Resource Officer/School Security Officer Grant Program--SSO

Subgrantee: Carroll
DCJS Grant Number: 21-B4748FR21
Grant Start Date: 07/01/2020
Grant End Date: 06/30/2021

Indirect Cost Rate: _____% *If applicable

Federal Funds:	\$ 0
State General Funds:	\$ 0
State Special Funds:	\$25,379
Local Match:	<u>\$ 9,621</u>
Total Budget:	\$35,000

Project Director	Project Administrator	Finance Officer
Mr. Mark Burnette Division Superintendent Carroll County Public Schools 605-9 Pine Street Hillsville, VA 24343 (276) 730-3200 maburnet@ccpsd.k12.va.us	Mr. R. Cellell Dalton Interim County Administrator Carroll County 605-1 Pine Street Hillsville, VA 24343 (276) 730-3001 cellell.dalton@carrollcountyva.gov	Ms. Tammy Quesenberry Finance Manager Carroll County Public Schools 605-9 Pine Street Hillsville, VA 24343 (276) 730-3200 tquesenb@ccpsd.k12.va.us

***Please indicate your ICR in the space provided, if applicable.** As the duly authorized representative, the undersigned, having received the Statement of Grant Awards (SOGA) and reviewing the Special Conditions, hereby accepts this grant and agree to the conditions and provisions of all other Federal and State laws and rules and regulations that apply to this award.

Signature: _____

Authorized Official (Project Administrator)

Title: _____

Date: _____



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June 4, 2020

Mr. R. Cellell Dalton
Interim County Administrator
Carroll County
605-1 Pine Street
Hillsville, VA 24343

RE: School Resource Officer/School Security Officer Grant Program--SSO

Dear Mr. Dalton:

Congratulations on being a recipient of the above referenced grant program! Your DCJS grant award number is **21-C4551FR21** and was approved for a total award of **\$35,000**. The project period is **07/01/2020** through **06/30/2021**.

Included with this letter is a Statement of Grant Award/Acceptance (SOGA). Please note hard copies of the General Special Conditions, as well as the Reporting Requirements and Projected Due Dates, are no longer included as part of the Grant Award Package. Instead, these documents have been combined and are now referred to as **Conditions and Requirements** and are posted online at <https://www.dcjs.virginia.gov/grants/grant-requirements>.

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We will be happy to assist you in any way we can to assure your project's success. To indicate your acceptance of the award and conditions, please sign the included SOGA and return it electronically within the next 60 days to grantsmgmt@dcjs.virginia.gov. If you have questions, contact (Michelle Miles) at (804) 225-1846 or via email at Michelle.Miles@dcjs.virginia.gov.

Sincerely,

Shannon Dion
Shannon Dion

STATEMENT OF GRANT AWARD (SOGA)

Virginia Department of Criminal Justice Services
1100 Bank Street, 12th Floor
Richmond, Virginia 23219

School Resource Officer/School Security Officer Grant Program--SSO

Subgrantee: Carroll
DCJS Grant Number: 21-C4551FR21
Grant Start Date: 07/01/2020
Grant End Date: 06/30/2021

Indirect Cost Rate: _____% *If applicable

Federal Funds:	\$ 0
State General Funds:	\$ 0
State Special Funds:	\$25,379
Local Match:	<u>\$ 9,621</u>
Total Budget:	\$35,000

Project Director	Project Administrator	Finance Officer
Mr. Mark Burnette Division Superintendent Carroll County Public Schools 605-9 Pine Street Hillsville, VA 24343 (276) 730-3200 maburnet@ccpsd.k12.va.us	Mr. R. Cellell Dalton Interim County Administrator Carroll County 605-1 Pine Street Hillsville, VA 24343 (276) 730-3001 cellell.dalton@carrollcountyva.gov	Ms. Tammy Quesenberry Finance Manager Carroll County Public Schools 605-9 Pine Street Hillsville, VA 24343 (276) 730-3200 tquesenb@ccpsd.k12.va.us

***Please indicate your ICR in the space provided, if applicable.** As the duly authorized representative, the undersigned, having received the Statement of Grant Awards (SOGA) and reviewing the Special Conditions, hereby accepts this grant and agree to the conditions and provisions of all other Federal and State laws and rules and regulations that apply to this award.

Signature: _____

Authorized Official (Project Administrator)

Title: _____

Date: _____