

FY 2024 TVSSA Population Certification Web Form

APPLICATION WORKSHEET

Thank you for your interest in applying for a Fiscal Year (FY) 2024 Tribal Victim Services Set-Aside (TVSSA) grant award. This worksheet outlines the data you will need to collect to submit a TVSSA Population Certification form. **Please Note:** The Population Certification form is web-based. While you can use this worksheet to organize the information you need to include in the online form—it is **NOT the actual form**.

OVC will use the information applicants submit in the online Population Certification form to determine:

- Whether or not each applicant has satisfied the eligibility requirements to receive a TVSSA award; and
- The maximum award amount each applicant will be eligible to receive once we have applied our population-based formula to the FY 2024 Tribal Set-Aside funding.

All applicants must submit a completed Population Certification form online by no later than 11:59 p.m., Alaska time, on Tuesday, February 20, 2024.

If you need assistance completing the form or are concerned about making the deadline, please email the OVC TVSSA team at: ovctribalsetaside@ojp.usdoj.gov.

Prepare and Submit the Form

Follow these steps for a successful application process—

1. **Gather Information:** This worksheet organizes the questions you will need to answer by the headings used in the online form- *Background, Population Data, Certification, and Follow-up Information*. Please review the worksheet and collect the information that you will need before attempting to complete your Population Certification form online. Taking this step will help make sure that the data you enter online is accurate and complete.
2. **Enter Data:** Enter your responses from the worksheet in the fields of the [online Population Certification form](#) and submit the form.
3. **Confirmation:** Check your email for a message acknowledging that your submission was successful. The email message will also include the data that you entered online. Please review the data to ensure it is correct. If you do not receive a confirmation email, or if the information you submitted has an error(s) contact OVC at ovctribalsetaside@ojp.usdoj.gov for technical assistance.

Background

Applicant Tribe/Organization Name:

Use the legal entity name of your Tribe or organization as it appears in SAM.gov if you have an active SAM.gov registration.

Please note: ALL applicants must have an active SAM.gov registration in order to submit Part 2 of the TVSSA application.

Name of Primary Contact (this is the person filling out the form):

Title:

Email:

Phone:

Name of Secondary Contact (this is someone who can answer questions about the form for the primary contact if they are unavailable):

Title:

Email:

Phone:

Applicant Type:

1. Federally Recognized Tribe
2. Authorized Designee
3. Tribal Consortium

Tribal Authorizing Resolution or Equivalent Documentation

An authorized designee or consortium must submit documentation with this certification demonstrating it has the requisite legal authority to submit this form on behalf of a Federally recognized Tribe(s). See *Tribal Authorizing Resolution* in the [OJP Grant Application Resource Guide](#).

Upload Resolution or Equivalent Documentation

Select the applicant type. You will be prompted to upload documentation if you choose authorized designee or consortium.

- If you have more than one file, create a zipped folder (if you've never done this before, you can search for instructions specific to your computer in your web browser).
- Uploads are limited to 256 MBs, if your file exceeds that size, email OVCTribalsetaside@ojp.usdoj.gov to make arrangements to submit documentation.

Population Data

You will be asked to submit your population tier, total population, and the source of the population data in this section.

Application-Defined Population Data: OVC generally will defer to the population information an applicant includes in its certification. If an applicant fails to specify a tier, OVC will place the applicant in Tier 1. If an applicant specifies a tier but does not include the total population, OVC will place the Tribe in the specified tier.

However, for purposes of running the formula to calculate each tier's funding allotment, OVC will account for missing population numbers by creating a proxy population number using the average population numbers of other Tribes within the same tier.

Recordkeeping: An applicant must keep documentation supporting their population certification. Consortia or authorized designee applicants must also maintain documentation (e.g., Tribal resolutions, communications from Tribal enrollment/leadership officials, and/or consortium bylaws) demonstrating its authority to certify on behalf of each Tribe(s) whose populations are included on their form. This documentation is subject to review and audit.

Federally Recognized Tribe Name:

You will select the Tribe Name. If you are certifying a population that is not a federally recognized Tribe, choose "other" in the drop-down menu and add details in the "Population Source" field. This dropdown list is in alphabetical order, grouped by the lower 48 states, followed by Alaska Native communities.

Total Population: (You will enter numbers only, with no commas or special characters.)

Population Tier: (Select your tier from the drop-down menu.)

- Tier 1: 999 and below
- Tier 2: 1,000-4,999
- Tier 3: 5,000-9,999
- Tier 4: 10,000-14,999
- Tier 5: 15,000-24,999
- Tier 6: 25,000-39,999
- Tier 7: 40,000-59,999
- Tier 8: Above 60,000

State (Enter the state listed in the Tribe's SAM.gov registration):

Population Source:

Briefly describe the source(s) of the total population for the purposes of completing this form.

Sample response: Enrolled Tribal members (as provided by the Tribal enrollment registrar) and non-members within the Tribe's jurisdictional boundaries (as shown by 2010 Census data). Tribal Service Area.

Add another Tribe (This button allows you to add the data for another Tribe. If you are submitting multiple populations, use the table at the end of this worksheet to gather data.)

Certification

By entering my information below, and by submitting this certification on behalf of the applicant named above, and in support of its application, I certify to the Office for Victims of Crime (OVC), U.S. Department of Justice, under penalty of perjury, that—

- (1) all of the information provided in the Population Certification (including the population data) is true and correct;
- (2) I have the authority to make this certification on behalf of the applicant (that is, the entity applying directly to OVC);
- (3) the applicant has the authority to apply for this grant program, and provide the population data provided herein, on behalf of each Tribe for which the applicant applies;
- (4) the applicant will keep on file (see 2 C.F.R. 200.333, generally requiring retention of records for 3 years after grant closeout), and available for inspection or audit, documentation substantiating the population data provided herein (e.g., data sets used, or correspondence from the relevant Tribal enrollment official(s) and Tribal chair(s), resolution(s), etc. providing or confirming such data);
- (5) I understand that OVC will rely on this certification as a material representation in any decision to make an award to the applicant entity; and
- (6) in the event that, during pre-application review, OVC becomes aware of a reason to question the population data certified herein for the Tribe(s), or the certifying authority, the applicant understands and agrees that OVC may (without further notice prior to the OVC action) deny this application (or, for consortia applicants, that Tribe's allocation), or use alternative data for that Tribe(s) for the FY 2024 formula calculation.
- (7) I understand and acknowledge that a materially false, fictitious, or fraudulent statement (or concealment or omission of a material fact) in this certification may be the subject of criminal prosecution, civil penalty, and/or administrative remedies (see 18 U.S.C. §§ 1001, 1621; 34 U.S.C. §§ 10271-10273; 31 U.S.C. §§ 3729-3730, 3801-3812).

Date of Certification:

Name of Certifying Official:

Title of Certifying Official:

Official Email of Certifying Official:

Official Address of Certifying Official:

Address Line 2:

City/Town:

State/Province:

Zip/Postal Code:

Country:

Follow-up Information

Program Narrative Preference

If OVC determines your Tribe or organization is eligible for TVSSA funding, you will be offered three options for completing the narrative section of your application in Part 2 of the application process. Please indicate your preferred option for completing a program narrative:

- Traditional Narrative
- Checklist
- Interview with OVC staff
- Not sure

Are you interested in funding a construction project with FY 2024 TVSSA funds?

- Yes
- No
- Not sure

