

**TOBACCO GRANT PROGRAM**  
**2021-22**  
**GRANT PROPOSAL TEMPLATE**  
**DOJ-PROP56-2021-22-1**



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**OFFICE OF THE ATTORNEY GENERAL**

**TOBACCO GRANT  
PROGRAM DOJ-  
PROP56-2021-22-1**

**PROPOSAL COVER SHEET**

SUBMITTED BY:

PROGRAM CONTACT:

Authorized Signatures:

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Name:

Title:

Date:

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Name:

Title:

Date:

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Name:

Title:

Date:

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Name:

Title:

Date:

**SUMMARY – DESCRIPTION OF REQUEST**

Description		
Funding Requested	\$	
Funding Duration (select one)	24 Months	36 Months
Summary of Goals and Objectives		

**PROBLEM STATEMENT – DESCRIBE THE ISSUES OR PROBLEMS TO BE ADDRESSED WITH GRANT FUNDS.**

Geographic Area to be Served		
Tobacco Rates and Patterns		
Other Known Factors		

*(Agencies are limited to one sheet for each goal, with a maximum of five goals. Goals must be listed in priority order and should match the Goals and Objectives Summary on page 4.)*

GOAL 1: \_\_\_\_\_

Goal Description	
Measurable Outcome	
Timeline	
Narrative Description	

GOAL 2: \_\_\_\_\_

Goal Description	
Measurable Outcome	
Timeline	
Narrative Description	

GOAL 3: \_\_\_\_\_

Goal Description	
Measurable Outcome	
Timeline	
Narrative Description	

GOAL 4: \_\_\_\_\_

Goal Description	
Measurable Outcome	
Timeline	
Narrative Description	



GOAL 5: \_\_\_\_\_

Goal Description	
Measurable Outcome	
Timeline	
Narrative Description	

Personnel Title(s)	For each personnel title requested, provide a description of each role (see page 8 of the RFP for instruction).

Budget Detail Sheet	All expenditures must be entered into the Excel Budget Detail Sheet. Instructions on how to complete the Budget Detail Sheet are available on the DOJ's website at <a href="http://oag.ca.gov/tobaccogrants">http://oag.ca.gov/tobaccogrants</a> . Please proceed to the required Budget Narrative (below).
Budget Narrative	All expenditures associated with Operating Expenditures, Equipment, Travel/Registration, and Other Expenses must be adequately justified in this section. Unallowable costs are listed on pages 9 of the RFP. Travel restrictions and limitations are explained on page 9.
Other State and Local Funding Sources for Proposed Grant Projects	

Prior Year Award(s)	Complete the fields below if your agency has been awarded a Tobacco Grant in a previous year/round.
Prior Year Award Accomplishments	
Prior Year Award Comparison	