

New Jersey Nonprofit Security Grant Program Security Personnel (NJ NSGP-SP)

Security Personnel – Application Form			
	Ι.	Application Information	
Organization's Legal Name:			
Street Address:			
Municipality:			
State:			
Zip Code:			
County:			
Name of Organization's Executive,			
President, or Head:			
Telephone:		Ex	xt:
Email:			
501(c)(3) Number:			
Unique Entity ID (UEI): (Applications can only be submitted with a current/valid UEI; pending UEI's will not be accepted)			
Organization Type (Short description of organization's ideology, beliefs, and mission): (300 character max – including spaces)			
Funding Amount Requested: (Maximum of \$20,000.00)			
Does your organization currently use Security Personnel:			
If "Yes" explain current use (i.e., agency, schedule, deployment locations, etc.). (250 Characters Max)			
and the NJ NSGP – Target Hardening Equip if all conditions are met.	mer		
Please select a preference if conditions are	me	t for both:	

	II. Background (6 Points)
Descri	be the nonprofit organization including (1,200 character max – including spaces):
•	Membership and community served
•	Symbolic value of the site(s) as a highly recognized national or historical institution that renders the site as a possible target of terrorism
•	Any role in responding to or recovering from a terrorist attack, to include involvement with local, county, state and federal agencies.
Door	your arganization currently have an emergency operation Plan? If you please highlight the major elements of
	your organization currently have an emergency operation Plan? If yes, please highlight the major elements of an below (1,200 character maximum – including spaces):
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III. Risk (24 Points)
Risk is defined as the product of three principle variables: threat, vulnerability and consequences. In the space below,
describe findings from previously conducted risk assessments, to include threat vulnerability and consequence of an
attack (1,200 character maximum for each section – including spaces):
Threat Section:
Threat: Defined as an "action that has or indicates the potential to harm life, information, operation and property". In considering threat, the applicant should discuss the identification and substantiation of prior threats or attacks specifically against the nonprofit facility for which this application seeks to support. When applicable, the applicant shall also discuss the identification and substantiation of prior threats or attacks of a closely related organization (either statewide, nationally or internationally) by a terrorist organization, network or cell. The applicant should also discuss findings from a threat assessment, police reports and/or insurance claims.

Vulnerability Section:
Vulnerability: Defined as "physical features or operational attributes / practices that render an entity open to threat".
In considering vulnerabilities, the applicant should discuss the organization's susceptibility to destruction,
incapacitation or exploitation by a terrorist attack.
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Consequences Section:
Consequence: Defined as the "effect of an event, incident or occurrence." In considering consequences, the applicant
should discuss potential negative effects on the organization's assets, system, and/or network if damaged, destroyed, or disrupted by terrorist attack (i.e. human, psychological, economic, community, etc.) Applicants should memorialize when the consequence is of the greatest concern (i.e. specific time of the week/month/year or high-profile events, etc.) where the use of security personnel would be most beneficial. Within your narrative, please include the total number of members/customers served and how often (i.e. daily, weekly, monthly, etc.)
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IV. Impact – Use of Security Personnel (24 p	points)	(24	/ Personnel (Security	- Use o	Impact -	IV.
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Please explain the days, total hours of work each day, total hours of work per week, the number of weeks (not to exceed the Period of Performance) security personnel are to be hired, anticipated hourly rate, agency with whom the security personnel will be obtained (i.e. municipal police department/private security firm, etc.), and the physical location(s) of your facility they are to protect.

This funding is exclusively for the hiring of security personnel and is limited to federal, state, county, or municipal law enforcement officers, active special law enforcement officers appointed pursuant to P.L.1985, c.439, or security officers registered pursuant to P.L. 2004, c.134. The use of other personnel for security purposes that do not fit the above description is not eligible under this program. Additionally, this funding shall not be used to supplant the expenses of current security personnel identified in Section I of this application. An example of supplanting includes the use of grant funding to pay for security expenses which are inclusive of the organization's operating budget, including existing security personnel services. Note, this grant funding may be used to expand existing security personnel needs based on the risks identified in Section III of this application.

Please note, the selected agency and scheduling information provided in this section shall serve as the approved agency and schedule should your organization receive this grant funding. Unannounced visits will be conducted to ensure agency compliance with the terms and conditions of the funding program.

Days (i.e. Saturday, etc.):	Total number of security personnel per day:
Total hours per day:	Total hours per week:
Number of weeks (not to exceed 104):	Hourly rate:

Physical location(s) security personnel will be posted and why the location(s) was selected:

Name and address of agency, if known, providing security personnel that has been contacted and meets the required eligibility and will be providing services at the hourly rate quoted:

Describe how the use of the proposed security personnel will mitigate the risks identified in Section III of this application and enhance security measures for your membership:

Security personnel may be used for "off-site locations" for which the nonprofit applicant primarily organizes and has legal liability. Off-site locations must be within the State of New Jersey and must involve the participation of the organization's congregation and/or invited guests. Executive protection or small private functions that do not include the full membership and/or invited guests are prohibited.

Do you intend to provide security personnel for any allowable "off-site" location as described above?

If yes, please complete the following to the best of your present knowledge;

Type of event and pur	pose:			
Number of Off-site Events planned:				
Number of Member/Guests attending:				
Date(s) & Hours:				
Facility, Street Address, Municipality, County:				
	V. Project	Management (8 Points		
Who will manage the project? Please provide all project management team names and contact information including phone numbers and emails				
	Name	Phone	Email	
Project Manager:				
Alternate:				
Fiscal/Administrator:				
 Describe any cl 	ail the roles & responsibilities of hallenges that may be faced with ordination efforts with State ar	th project implementation		

\	VI. Grant Funding History		
Has the applicant received OHSP administered security grant funding (State and/or Federal) in the past for the			
which it is currently requesting funding?			
If yes, provide the funding source, funding	amount, funding year, and investment type. Additional grant		
information can be placed within the Additional Information box below.			
Grant funding in the Past (yes/no):			
Source of Funding:			
Jource of Funding.			
Year(s) Grant Funding Received:			
real(s) Grant Funding Neceived.			
For dia a America			
Funding Amount:			
Investment Type:			
Additional Information:			