

Minnesota Department of Public Safety

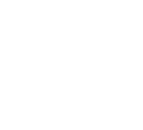
Office of Justice Programs

2025 Intensive Comprehensive
Peace Officer Education &
Training (ICPOET)
RFP Overview and Q&A



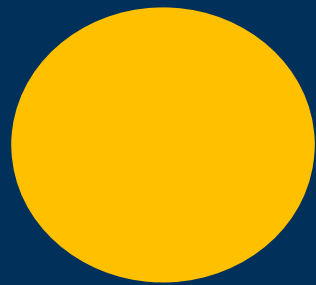
Presented by:

Mary Vukelich, ICPOET Program Administrator
Kristin Lail, Law Enforcement Grant Administrator



Minnesota Department
of Public Safety
Office of Justice Programs

Mission



145 Million Appropriated
FY 2024 Budget

35%
Federal
Funds



65% General
Funds

<1%
Special Revenue

The Office of Justice Programs (OJP) provides leadership and resources to reduce crime in Minnesota, improve the functioning of the criminal justice system and assist crime victims.



Minnesota Department
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Office of Justice Programs

Intensive Comprehensive Peace Officer Education and Training Grant

Legislative Requirements:

- Cities, counties and tribal law enforcement.
- Recruitment of candidates with prior degrees.
- Reimbursement for police training and salary.
- \$50,000 maximum reimbursement per candidate.
- Geographic diversity considered based on applications received.

Funds authorized by 2023 MN Session Laws, Chapter 52.



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Intensive Comprehensive Peace Officer Education and Training Grant

Round One, by the numbers:

- Funding for 50 candidates, \$2.5 million
- Thirty-five agencies applied, 35 awarded.
- Additional 15 candidates were distributed across agencies who requested more than one candidate (competitive criteria)



Statute Requirements

Prior degree required.

- Regionally accredited college or university.
- Two- or four-year degree.

Professional Peace Officer Education (PPOE)

- Academic providers of ICPOET Cohorts:
- Alexandria Tech
 - Hennepin Tech

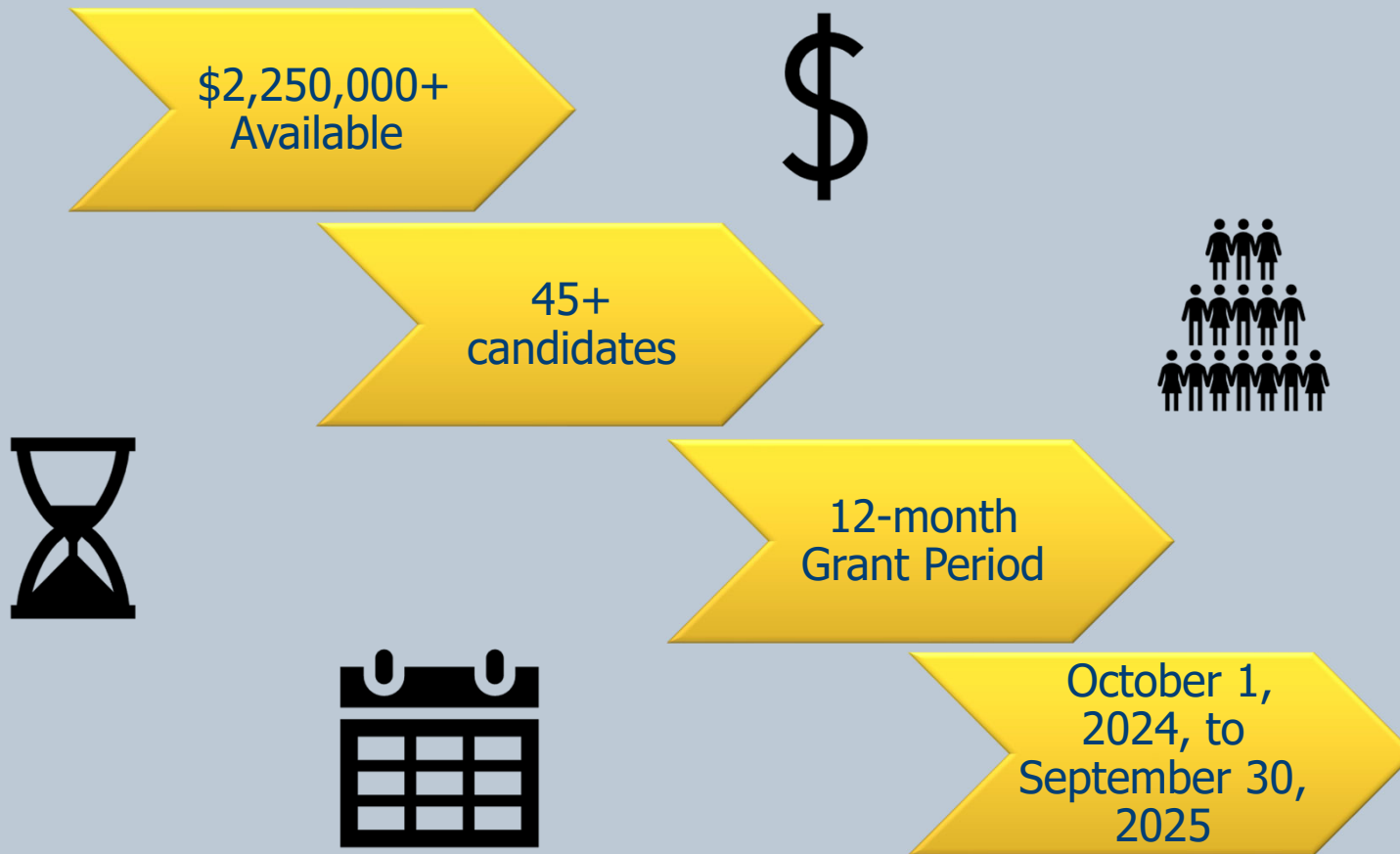
Candidate will be employee of sponsoring agency grantee.

- Intended for candidates interested in career transition.



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Current RFP Funding



ICPOET Grant Application Files

	<u>Grant Program Guidelines 2025</u>
	<u>Terms and Conditions</u>
	<u>Project Information Form</u>
	<u>Intensive Comprehensive Peace Officer Education and Training Information Form</u>
	<u>Grant Narrative</u>
	<u>Organization Financial Information</u>
	<u>Indirect Rate Documentation</u>
	<u>Purpose Area</u>
	<u>Budget (2)</u>
	<u>Budget Summary</u>

ICPOET Information Form

INTENSIVE COMPREHENSIVE PEACE OFFICER EDUCATION AND TRAINING PROGRAM INFORMATION FORM

1. The Number of Candidates Applying For: *
2. Are The Candidates Identified? *
3. If So, How Many?
4. Actual Strength of Department (Enter current # of employed peace officers): *
5. Authorized Strength of Department: (Enter # agency could employ): *
6. Anticipated School Candidate/s Would Attend: *
7. Acknowledgement of Candidate Employment Requirement: *



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Narrative Outline

- Overview of community and agency demographics.
 - Need statement based on strength, retention, etc.
- Description of your ICPOET program recruitment and selection process.
 - Describe your plan to recruit career transition candidates with specific details (don't assume prior knowledge)
- Elaborate on any information provided in the ICPOET Information Form
 - Details around candidates, if known. We specifically encourage you tell us about your candidates, if identified. Names and/or personal information not needed, but a bit about them and/or how you identified them.



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Applicant Organization Financial Information

1. Grantee Information

- Organization Entity Type.

2. Fiscal Information

- Accounting Basis.
- Calendar Year.
- Frequency Financial Documents Produced.

3. Financial Documentation

- Annual Revenue including federal funds, if applicable.
- Upload copy of most recent city, county or tribal annual audit.
- Note any findings and corrective actions.

4. Administrative Systems

- Check boxes yes or no.
- Organizational Chart

5. Grant Management Experience

- Check boxes yes or no.

Organizational Financial Information

ORGANIZATION FINANCIAL INFORMATION

Instructions

- All fields marked with a red asterisk (*) are required.
- After completing all required fields, click **SAVE** to store the information on this page.
- **Completion of this page is required.**
- For additional information or detailed instructions, click the **Show Help** button.

Grantee Information

1. Organization Entity Type *

- City
- County
- Higher Education
- Inter/Intra agency, State of MN (IA)
- Non-Government For-Profit (including individuals registered as a business)
- Non-Government Non-Profit
- Other Government
- School District
- Sovereign Entity

Fiscal Information

Instructions

- Questions 1 through 3 apply to all entities.
- Questions 4 through 12 only apply to individuals registered as a business and non-government entities.

1. Accounting Basis * Accrual Cash

2. Fiscal Year *

3. Specify how often financial documents are produced. *

Specify the "Other Frequency" in the space provided below. *

Financial Documentation

Instructions

- Provide comprehensive responses or select the best option to all the questions listed below and upload any necessary documentation that pertains to your organization.
- **This section is not required for completion by State of Minnesota Agencies (state agencies, intra agency, or interagency applicants).**

1. Select the agency annual revenue level that is applicable to your organization and upload the most recently completed respective financial documents. *

- A. Agency with annual revenue under \$50,000.
- B. Agency with annual revenue ranging from \$50,000 to \$750,000.
- C. Agency with annual revenue over \$750,000 and federal expenditures less than \$750,000.
- D. Agency with federal expenditures of \$750,000 or more during a fiscal year.

C. Agency with annual revenue over \$750,000 and federal expenditures less than \$750,000

Audit Firm Name *

Audit Report Type *

Certified Financial Audit *

No file chosen

DELETE

Date of most recent Certified Financial Audit *

Upload the Management Letter in the space provided below - OR - select N/A if the Management Letter is already included in the audit file uploaded above to waive the requirement. *

Certified Financial Audit Management Letter

No file chosen

N/A - Management Letter Already Included

Audit Findings

Our organization had audit findings in the most recent Certified Financial Audit. * Yes No

Organizational Financial Information

Administrative Systems & Internal Controls

1. Our organization has had an instance of misuse or fraud in the past thirty-six (36) months. * Yes No
2. Our organization has a current or pending lawsuit against the organization. * Yes No
3. Our organization has separate accounts for different programs/revenue sources to prevent co-mingling of funds. * Yes No
4. Our organization's accounting system can identify and track grant program related income and expenses separate from all other income and expenses. * Yes No
5. Our staff members who are paid by more than one source of funding keep track of their time per funding source. * Yes No
6. Our organization has a paid bookkeeper. * Yes No
7. Our organization has an approval process that requires multiple levels of approval before funds can be expended. * Yes No
8. Our organization has written policies and procedures for accounting, purchasing and payroll. * Yes No
9. Our organization has less than six (6) funding sources that account for our total revenue. * Yes No
10. Our organization can easily retrieve original receipts for expenses that are reimbursed by grant funds. * Yes No
11. Our organization's governing body meets at least every month. * Yes No
12. Our organization has a Conflict of Interest policy. * Yes No
13. Our organization has an active registration with the Secretary of State and has a Certificate of Good Standing. * Yes No N/A Government Entity
14. Our organization is on the State of Minnesota Office of State Procurement Debarment list. * Yes No
15. Our organization is on the Federal Debarment list. * Yes No
16. Our current principals have been convicted of a felony financial crime in the last ten (10) years. * Yes No

Instructions

- Upload the organizational chart or list of principals being certified in the space provided below.
- Select the checkbox and **save the page** to provide an electronic signature and certify authentication.

Organizational Chart *

No file chosen
[1206804_5063416-2023OrganizationalChart-portrait.pdf](#)

- By selecting this checkbox, I warrant that no current principal of my organization has been convicted of a felony financial crime in the last ten (10) years. *

I certify that the information provided is true, correct, and reliable. The submission of inaccurate or misleading information may be grounds for disqualification from the grant contract agreement award and may subject me/my organization to suspension or debarment proceedings, as well as other remedies available to the State, by law.

Grant Management Experience

1. Our organization has had more than one (1) administrative turnover in the past twelve (12) months. * Yes No
2. Select the option that best applies to your organization. *
 - Monitored funding and completed reporting for non-federal and/or federal grants.
 - Monitored funding and completed reporting for only non-federal grants.
 - Monitored funding and completed reporting for contracts but not grants.
 - No prior experience monitoring funding and reporting expenditures for contracts and/or grants.
3. Our organization has received a grant from the Minnesota Department of Public Safety (MNDPS) in the last five (5) years. * Yes No
Our organization has received a grant from the following MNDPS divisions in the last five (5) years: *
 - Emergency Communication Networks (ECN)
 - Homeland Security and Emergency Management (HSEM)
 - Office of Justice Programs (OJP)
 - Office of Traffic Safety (OTS)
 - State Fire Marshal (SFM)
 - Minnesota State Patrol (MSP)
 - Driver and Alcohol Services (DVS)
 - Alcohol and Gambling Enforcement (AGE)
 - Bureau of Criminal Apprehension (BCA)
 - Fiscal and Administrative Services (FAS)
4. The work of our organization aligns with the requirements of this grant based on the description of services and/or products provided by this funding opportunity. * Yes No
5. Our organization has a history of successfully providing proposed services or performing activities for this grant funding opportunity. * Yes No
6. Specify whether providing the proposed services and/or performing grant activities will require additional staff or resources. * Yes No



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Sample Budget

BUDGET SUMMARY – Sample 2 cadets		
Budget Category	Award	Match
Personnel		
Wages Cadet 1 (40 hr x 25wks x \$20/hour)	\$20,000.00	
Wages Cadet 2	\$20,000.00	
Total	\$40,000.00	
Fringe (calculated at 27%)		
Cadet 1 (\$5400 full fringe)	\$5,000.00	
Cadet 2	\$5,000.00	
Total	\$10,000.00	
Travel & Training		
Tuition & Equipment Cadet 1	\$25,000.00	
Tuition & Equipment Cadet 2	\$25,000.00	
Total	\$50,000.00	
Total	\$100,000.00	



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Sample Budget

BUDGET SUMMARY – Sample with housing		
Budget Category	Award	Match
Personnel		
Wages Cadet 1	\$17,600.00	
(40 hrs/wk x 22 wks x \$20/hour)		
Total	\$17,600.00	
Fringe (calculated at 27%)		
Cadet 1	\$4,752.00	
(\$17600 x 0.27)		
Total	\$4752.00	
Travel & Training		
Tuition & Equipment Cadet 1	\$25,000.00	
Mileage/Housing Cadet 1	\$2,648.00	
Total	\$27,648.00	
Total	\$50,000.00	



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Application Overview

Project Information Form

Enter directly into e-grants

Federal & State ID #s entered here

ICPOET Info Form

Number of candidates and if identified

Actual Strength vs Authorized Strength of Sworn Personnel

Preferred School Provider, if any/known

Acknowledgement of Employee requirement

Narrative

Word doc, 3 Page Limit, 12 point font

Organize by labeling or titling responses

Don't add supplement links or documents

Upload into e-grants

Budget

Entered directly into e-grants

Reflect education & salary costs by cadet

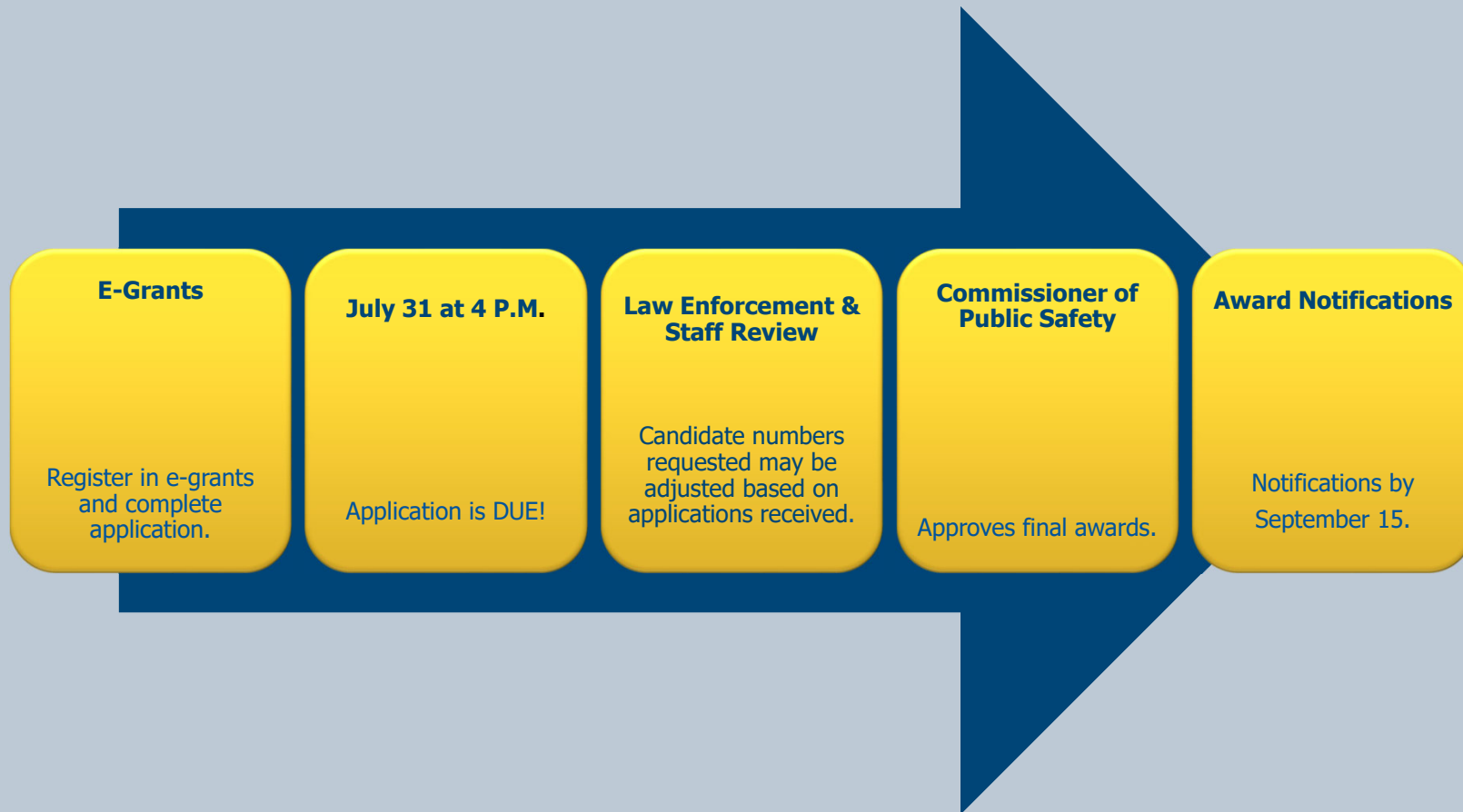
Grant only- total should equal request amount

Should match narrative



**Minnesota Department
of Public Safety**
Office of Justice Programs

Request for Proposal Application Timeline





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Review Process

15 points narrative

5 points budget

20 points total

Applications will be reviewed by geography (greater Minnesota versus metro area) along with size of agency (>25 or <= 25) meaning from a competitive review you will be evaluated from perspective of those similar to your agency.



Review Worksheet (used by review panel)

ICPOET 2025 - APPLICATION REVIEW	
Number of Candidates Proposed	
Are some/all candidates identified? (1 point)	
If yes, how many from total?	
Department Authorized Strength	
Department Actual Strength	
If Authorized > Actual (1 point)	
Agency Name	
Tell us about your community	Points 2+2=4
Location in context of state included (any unique challenges/characteristics)	
Population including demographics (census good source)	
Total:	0
Tell us about your agency	Points 2+2=4
Agency Demographics	
Needs Statement (specific to your agency)	
Total:	0
Recruitment	Points 2+2+1 = 5
Proposal explains existing recruitment plan	
Specifically, how will recruiting will be different for this/these candidates?	
Has/Have candidate(s) been identified? If yes, tell us about them.	
	0
Budget (reviewed by OJP)	Points 2+2+1=5
Line item for each category expense (salary, fringe separate)	
Calculations of budget items provided	
Reflects anticipate expense per candidate	
Total:	0
Proposal Total Score:	



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Grant Budget Changes

Application Modification

If awarded a different grant amount, you will revise the budget in e-grants prior to executing the grant agreement.

Grant Amendment

If you have a change in participant numbers, it may be possible to revise fund amounts from your grant in an amendment.

Budget Revision

If there is a shift of expenses between line items, a budget revision can be processed prior to expenses being incurred.

*



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Reporting Requirements

Quarterly Reporting Requirements

2024: December 31

2025: March 30, June 30, September 30
Final Report:
September 30, 2025

Help is available along the way, please ask

Progress Report

Brief narrative required!

Activities mentioned should match expenses

Final report will require POST number entry

Upload documentation of POST certificate or letter.

Financial Status Report

Entered directly into e-grants.

Should mirror items in the grant budget.

Upload source documentation for submitted expenses



Minnesota Department
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Questions?

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