



**Marion County Board of County Commissioners**  
**601 SE 25th Ave.**  
**Ocala, FL 34471**

**2018 Marion County Alcohol and Other Drug Abuse Trust Fund**

**DUE:** March 15, 2018

For questions relating to this solicitation, contact Michael McCain at  
[michael.mccain@marioncountyfl.org](mailto:michael.mccain@marioncountyfl.org) or 352-438-2313.

Company name: \_\_\_\_\_  
Applicant name: \_\_\_\_\_ Title: \_\_\_\_\_  
Email address: \_\_\_\_\_ FEIN: \_\_\_\_\_  
Street address: \_\_\_\_\_  
Mailing address (if different): \_\_\_\_\_  
Telephone: (\_\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_\_) \_\_\_\_\_

Submittals must be emailed to: [michael.mccain@marioncountyfl.org](mailto:michael.mccain@marioncountyfl.org)

**Only electronic submittals will be accepted.**

**Submittals must include responses to the attached criteria in the order presented with all sections containing some type of response. Those questions not applicable to your agency must be noted as "not applicable"**

***This document must be completed and returned with your submission.***

## 2018 Marion County Alcohol and Other Drug Abuse Trust Fund Request for Proposals

### **Description:**

Agencies providing alcohol, drug and substance abuse prevention, education, and treatment services in Marion County may benefit from a grants program available now. Helping individuals overcome substance and alcohol abuse, along with providing resources and education to help prevent it, contributes to the quality of life and safe environment that an entire community enjoys.

Through the Marion County Alcohol and Other Drug Abuse Trust Fund (funded by court fees, per state statute and county ordinance), the county is offering a total of \$20,000 this fiscal year for assistance grants to qualifying agency programs based on the answers to the attached questionnaire as well as available grant funds.

Grant funds will be provided on a reimbursement basis for programs taking place from Oct. 1, 2018 to Sept. 30, 2019. Proposals must include information showing compliance with criteria and must be emailed to Mike McCain, Fiscal Manager, at [michael.mccain@marioncountyfl.org](mailto:michael.mccain@marioncountyfl.org) by 5 p.m. on March 15, 2018.

Proposals recommended for grant assistance will be presented to the Marion County Board of County Commissioners for approval. Grant recipients will be notified by email upon board approval.

For more information about the Marion County Alcohol and Other Drug Abuse Trust Fund grants program, please contact Mike McCain at [michael.mccain@marioncountyfl.org](mailto:michael.mccain@marioncountyfl.org) or 352-438-2313.

### **Submittal Requirements:**

Complete the first page of this request for proposals and turn in with your submittal.

Complete all areas of attached criteria in the order presented and include any additional information pertinent to this grant request. If any of the criteria are not applicable to the services provided by your agency, an answer of N/A or an explanation of why it does not apply is acceptable. Proposals will be scored according to the weight attached to each question.

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**Submittals must be presented in the following order:**

**Section 1:**

Describe agency drug abuse treatment program  
Weight for this category is 10

**Section 2:**

Describe agency drug abuse education (prevention, outreach etc.)  
Weight for this category is 10

**Section 3:**

Describe the agency qualifications and capabilities.  
Weight for this category is 5

**Section 4:**

Describe the qualifications and abilities of professional personnel. Resumes may be included if desired.  
Weight for this category is 5

**Section 5:**

Describe the history of the agency and length of time the program(s) have been in existence.  
Weight for this category is 20

**Section 6:**

Describe the program success including statistics showing recidivism rates, program completion, success stories, etc.  
Weight for this category is 20

**Section 7:**

Describe the number of citizens served annually by program. Breakout adults, children and veterans if applicable.  
Weight for this category is 20

**Section 8:**

Describe how you serve veterans. This may include information regarding services provided directly to veterans or to their families.  
Weight for this category is 5

**Section 9:**

Firm Location – Describe where your agency is located and all areas served including Marion and surrounding counties.  
Weight for this category is 10

**Proposals not addressing all of the above sections or not following the order as described may be considered unresponsive or may have points deducted.**