

# The Supreme Court of Ohio

*Applications Received September 22, 2025 – October 24, 2025 (5:00 PM)*

## INSTRUCTIONS

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The Supreme Court of Ohio (Court) is requesting grant applications to fund local court case management system upgrades for Ohio Adult Drug Courts (including OVI and Substance Abuse and Mental Illness (SAMI) dockets) and Veteran Treatment Courts certified by the Court's Commission on Specialized Dockets. The mission of this opportunity is to fund new or upgraded case management systems to help standardize docket processes and data collection, including the creation of an interface with the Court's data system pursuant to Sup.R. 36.20, Appendix I, Standard 12. The system should support the courts' use of the United States Department of Veterans Affairs' Veterans Re-Entry Search Service (VRSS) for determining the veteran status of people referred to the docket.

The Court is the recipient of a U.S. Department of Justice grant in the Court's Specialized Dockets Section. The applicants project shall include a system that is web-based and offer the following capabilities: a centralized system where staff can track participants, perform case planning, schedule dockets, create staffing reports, satisfy state data reporting, and ultimately assist in assessing adherence to best practice standards.

This application is offered based on the detailed requirements outlined in the *Request for Grant Applications* and may be found on the Court's website: <https://www.supremecourt.ohio.gov/courts/judicial-system/supreme-court-of-ohio/admin-offices/office-of-chief-financial-officer/grants/>.

The application must be received no later than **5:00 pm on October 24, 2025**. The application must be submitted by email to: [grants@sc.ohio.gov](mailto:grants@sc.ohio.gov). Submit questions to [grants@sc.ohio.gov](mailto:grants@sc.ohio.gov) or contact Mallory Geib, Finance and Grants Administrator at 614.387.9522.

### Applicant Court Information

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Court Name \_\_\_\_\_ Admin Judge \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_  
FEIN/Tax ID \_\_\_\_\_ County \_\_\_\_\_  
UEI Number \_\_\_\_\_  
Funding Amount Requested: \_\_\_\_\_

### Project Coordinator Contact Information

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Name \_\_\_\_\_ Title \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

**Project Supervisor Contact Information**

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Name \_\_\_\_\_ Title \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

**Fiscal Contact Information**

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Name \_\_\_\_\_ Title \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

**Contact Information of Person Responsible for Submitting Reporting**

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Name \_\_\_\_\_ Title \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

**Project Type: *Select the 1 box that most closely applies to your application***

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- ☐ Upgrade of an applicant court's existing case management system that creates an interface or a connection with the current Supreme Court of Ohio specialized docket data system.
- ☐ Purchase of an applicant court's new case management system that creates an interface or a connection with the current Supreme Court of Ohio specialized docket data system.

**Project Objective & Value Statement**

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## **Implementation Plan**

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## **Sustainability Plan**

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**Applicant Acknowledgements – *Must select all boxes to qualify***

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- ☐ Applicant understands that funds support one-time costs only and projects should plan for vendor installation by June 30, 2026.
- ☐ Applicant has attached a quotation from a vendor for costs associated with the project as justification for the funding amount requested.
- ☐ Provide to the Court, upon request, any activity and financial reports related to the project.
- ☐ Applicant confirms its Administrative Judge has reviewed and approved this application.
- ☐ Applicant will notify the Court if there is a change in the Administrative Judge or other contact information.
- ☐ Applicant understands that this grant opportunity is federally funded by the U.S. Department of Justice, Bureau of Justice Assistance and if awarded, will comply with all applicable laws and regulations in the Code of Federal Regulations and all other Terms and Conditions outlined in the Grant Award Agreement.
- ☐ By submitting this application, applicant certifies to the statement below:

I certify to the best of my knowledge and belief that the information provided herein is true, complete, and accurate. I am aware that the provision of false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative consequences including, but not limited to violations of U.S. Code Title 18, Sections 2, 1001, 1343 and Title 31, Sections 3729-3730 and 3801-3812.

Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_