

RASP Application 2022

1. Applicant Information

Agency Name _____

Primary Contact _____

Mailing Address _____

City _____ State _____ Zip Code _____

Phone _____ FAX _____

E-Mail _____ Taxpayer ID _____

Ownership : Private Public Status : For-Profit Non-Profit

Date Business was established: _____ Years providing proposed services _____

Number of Full Time Employees: _____ Number of Part-time employees _____

Number of service sites in Dallas County = _____ Outside Dallas Co = _____

Email and/or phone contact for referrals to locations outside of Dallas
County: _____

Service Site 1 Address: _____

Phone _____

Service Site 2 Address: _____

Phone _____

Service Site 3 Address: _____

Phone _____

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2. Please indicate which services you are applying to provide:

Outpatient Treatment Services : Please note, DCCSCD requires outpatient treatment providers to have appropriate licensure and five (5) years of agency experience providing drug and alcohol treatment in order to apply in this category.

- Supportive Outpatient Program (SOP)
- Intensive Outpatient Program (IOP)
 - Dual Diagnosis Outpatient Treatment (specialty designation)
 - Spanish-Language Outpatient Treatment (specialty designation)

Certified Education Services : Please note, DCCSCD will utilize the TDLR Offender Education Programs list to refer clients to these programs. Agencies MAY NOT apply to provide certified services without current certification or in anticipation of developing a program.

- Drug Offender Education (TDLR)
- Minor In Possession (TDLR)
- DWI Education (TDLR)
- DWI Intervention (TDLR)

Non -Certified Education Classes: Applicant agencies MAY NOT apply to provide services in anticipation of developing a program.

- Life Skills
- Parenting
- Theft Intervention (Anti-Theft)
- Marijuana Education

**** Please note: Battery Intervention and Prevention Program (BIPP) and Anger Management are NOT vetted through this committee or process****

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3. Please scan the following documents/information and send as attachments for application to cscdproviderapp@dallascounty.org.

- Copies of signed RASP, applicable RASP attachments, and this application.
- Agency Insurance Certificate (COI)
- Certificate of Occupancy (for all service sites)
- Staff roster of all employees, volunteers and contractors
- Staff** Licenses/Certifications
- Agency** Licenses and Certifications

4. ALL of the following documents/information must be maintained onsite for review:

- Pre-employment and annual criminal background checks on all employees, volunteers and contractors having direct client interaction or access to client records.