

Blount County, Tennessee Grant (Contract) Worksheet

(adopted February 21, 2013)

Please provide the information below for any Grant being applied for or recently awarded.

Once completed, return the worksheet via e-mail to the Grant Accountant at accounting@blounttn.org.

Requesting Department: Blount County Sheriff's Office
Contact Persons Name, email, phone # (person applying for grant): Angelie Shankle, ashankle@bcso.com, 865-273-5124
Reporting Persons information (if different than contact): Justin Beckman, Traffic Corporal
Name of Granting Agency: State of TN, Tennessee Highway Safety Office (THSO)
Grant Name: 2026-27 BCSO Network Coordinator
Is a grant application required? YES NO
Is this a one-time grant? YES NO If no, is the grant recurring? Yes

Grant Funds Requested:

Are County Funds Required (Match)? If so when approved, a budget amendment for match will need to be included with this form

Not Applicable - No Matching Funds Required

Total Amount of Grant:

\$ 24,000

Brief Description for Use of Grant Funds:
(Equipment, Gear, Personnel, etc.)

THSO's Law Enforcement Liaison Officers (LEL's) are the point of contact between THSO and the Sheriff's Office. The BCSO Network Coordinator works with LEL to carry out established initiatives to reduce traffic fatalities and accidents.

If the grant is in the application processes, what is the submission deadline?

31-Mar-26

Worksheet reviewed by -

Grant Accountant and/or Finance Director:

Date of Commission approval:

Please provide the remaining information once the Grant is approved.

Grant CFDA# (Catalog of Federal Domestic Assistance): To be supplied by THSO with Grant - if awarded

Date of Grant Award: _____

Grant Period: (such as: Oct 1 - Sept 30) _____

Expiration Date of Grant, as established by the Granting Agency: _____

Anticipated Closing Date of Grant Project: _____

How will we receive the Grant Funds? (direct deposit, check, other) _____

How often will the Grant Funds be sent? (monthly, quarterly, one payment, other) _____

**** Attach Budget Amendment(s) to this form when grant approved ****