INITIAL FVIP PROVIDER CERTIFICATION APPLICATION

Georgia Commission on Family Violence & Georgia Dept. of Community Supervision

Georgia Commission on Family Violence
2 Martin Luther King Jr. Drive, Ste 866
East Tower
Atlanta, GA 30334 | gcfv.ga.gov

Application Requirements Checklist: No application will be considered unless all required items are submitted to GCFV.

- ☐ Completed Application
- ☐ Submit Payment (Application will not be reviewed until payment is received)
- ☐ Verification of Lawful Presence & Affidavit
- ☐ Copy of current Victim Liaison contract
- ☐ Copy of intake/orientation paperwork
- ☐ Copy of participant contract
- ☐ Copy of Victim Contact Request form
- ☐ Probation/Referral notification forms
- ☐ Proof of General Liability Insurance ($1M min)
- ☐ Completed Background Check forms

PART 1: BASE FEE COMPONENTS & CALCULATION FORMULAS

Fee Breakdown Components (Base Year 2026 Rate): Your total initial provider fee is composed of three potential components:

- **Base Provider Fee ($250.00):** Covers 1 judicial circuit with a physical location.
- **Additional Circuit Fee (+$50.00/circuit):** Added for each additional physical location judicial circuit.
- **Virtual/Hybrid Class Modality Fee (+$100.00):** Flat fee added if offering virtual or hybrid class formats.

Base January Fee Formula:
Base January Fee = $250.00 + ($50.00 × Additional Circuits) + ($100.00 if Virtual/Hybrid)

PART 2: MONTHLY PRORATED FEE CALCULATIONS

1. January 2026 Submissions

Base January Fee: $250.00 (for 1 judicial circuit with physical location).
Cycle & Term: Assigned a January 1, 2026 cycle date, valid through December 31, 2027, with a renewal / recertification date of **January 1, 2028**.

2. First-Time Applicants Submitting Between February and June 2026

Applicants submitting between February and June 2026 are prorated back to the previous January 1, 2026 cycle date and assigned a **January 1, 2028** renewal / recertification date.

Prorated Base Fee = $250.00 – [Month Code × $10.42]

Application Month	Month Code	Prorated Base Fee Formula	Calculated Base Fee (1 Circuit)
February 2026	1	$250.00 – (1 × $10.42)	**$239.58**
March 2026	2	$250.00 – (2 × $10.42)	**$229.16**
April 2026	3	$250.00 – (3 × $10.42)	**$218.74**
May 2026	4	$250.00 – (4 × $10.42)	**$208.32**
June 2026	5	$250.00 – (5 × $10.42)	**$197.90**

3. First-Time Applicants Submitting Between July and December 2026

Applicants submitting between July and December 2026 are prorated forward to the following January 1, 2027 cycle date and assigned a **January 1, 2029** renewal / recertification date.

Prorated Base Fee = $250.00 + [Month Code × $10.42]

Application Month	Month Code	Prorated Base Fee Formula	Calculated Base Fee (1 Circuit)
July 2026	6	$250.00 + (6 × $10.42)	**$312.52**

Application Month	Month Code	Prorated Base Fee Formula	Calculated Base Fee (1 Circuit)
August 2026	5	$250.00 + (5 × $10.42)	**$302.10**
September 2026	4	$250.00 + (4 × $10.42)	**$291.68**
October 2026	3	$250.00 + (3 × $10.42)	**$281.26**
November 2026	2	$250.00 + (2 × $10.42)	**$270.84**
December 2026	1	$250.00 + (1 × $10.42)	**$260.42**

PROGRAM & OWNER INFORMATION

Legal Name of Org/Program:

Doing Business As (DBA):

Affiliated/Umbrella Orgs:

Program Email & Phone:

Physical Address:

Mailing Address:

Program Website:

Other Court-Ordered Approvals/Certifications:

☐ Alcohol & Drug / Non-DUI ☐ Alcohol & Drug / Clinical DUI ☐ Anger Management ☐ ASAM Level 1
☐ Shoplifting/Theft Prevention

Owner / Executive Director Information

Full Legal Name: **DOB:**

Email & Phone: **SSN:**

Mailing Address:

INITIAL FVIP CERTIFICATION PROVIDER CERTIFICATION TRAINING / TASK FORCE MEETING REQUIREMENTS

FVIP Informational Session Completion Date:

FVIP Basics Day 1 Completion Date:

FVIP Basics Day 2 Completion Date:

** Note: FVIP Basics Certificate is required to be submitted with this application.*

Family Violence Task Force Meeting Attendance

Task Force Name	Date of Meeting	Virtual / In-Person	Task Force Contact

CLASS LOCATIONS & FEE SCHEDULE

Please list all judicial circuits, physical class locations, and class schedules.

Judicial Circuit / Statewide (for virtual classes)	Class Address / Format (Zoom, GoogleMeet, Microsoft Teams, etc.)	Modality (In-Person / Virtual / Hybrid)
Atlanta Judicial Circuit (Example)	*999 Atlanta Street, Atlanta, GA 55555*	*In-Person*
Statewide (Example)	*Zoom / Virtual Format*	*Virtual*
Cobb Judicial Circuit / Statewide (Example)	*100 Cherokee St, Marietta, GA & Google Meet*	*Hybrid*

Class Schedule & Facilitators

Address / Location / Meeting Link	Time(s)	Day	Type (Men/ Women)	Language	Certified Facilitator
999 Atlanta Street, Atlanta, GA (Example)	*9:00 AM - 10:30 AM*	*Monday*	*Men*	*English*	*Polly A. Proved*
https://zoom.us/j/123456789 (Example)	*6:00 PM - 7:30 PM*	*Wednesday*	*Women*	*English*	*Polly A. Proved*
100 Cherokee St & https://meet.google.com/abc (Example)	*10:00 AM - 11:30 AM*	*Saturday*	*Men*	*Spanish*	*Polly A. Proved*

Class Fee Schedule & Indigent Fee Reduction Plan

FVIPs shall not charge participants a fee that exceeds $60.00 per class or $120.00 for orientation and/or application interview.

Federal Poverty Level (FPL) Category	Enrollment Fee	Class Fee
Standard Fee Structure	$_____	$_____
< 100% FPL (Sample: $25 / $15)	$_____	$_____
100% – 200% FPL (Sample: $50 / $30)	$_____	$_____
200% – 300% FPL (Sample: $75 / $45)	$_____	$_____

PROGRAM STRUCTURE REQUIREMENTS

Program Orientation Requirements

1. Certified facilitators will conduct an orientation and/or application interview with candidates. Neither the orientation nor the application interview will count toward the twenty-four (24) class requirement. The orientation and/or application interview shall include determining previous incidents of abuse, identifying the source of referral, and obtaining victim contact information.
2. Certified facilitators shall require candidates to provide copies of any police reports, protection orders, probation conditions, and any other court orders related to their case prior to starting FVIP classes.
3. Certified facilitators may use assessment tools for evaluating candidates for the appropriateness of FVIP classes.
4. Certified facilitators may not use evaluation tools or clinical assessments for the purposes of predicting a candidate's or participant's future use of violence or propensity for violence.

5. Certified facilitators shall assess candidates for accessibility requirements under state law.

Required Class Structure

1. FVIPs shall require each participant to attend a minimum of twenty-four (24) weekly group classes. Participants may not attend more than one (1) class per week.
2. Classes shall be at least ninety (90) minutes in length. Administrative duties, including taking attendance and collecting fees, are prohibited during the ninety (90) minutes of instruction time. Breaks shall not be included in the ninety (90) minutes.
3. A certified facilitator may not hold a class with more than ten (10) participants if only one (1) certified facilitator is present. Two (2) certified facilitators may co-facilitate a class not to exceed twenty (20) participants.
4. Participants may not have more than three (3) absences. A fourth absence must result in automatic termination from the FVIP.
5. Participants arriving late to class may attend class but not receive credit, and no payment shall be charged or received by the FVIP. If a participant is late to class three (3) times, it shall count as one (1) absence.
6. Transfer of a participant to another program will not be permitted unless the transfer has been approved. If approved, the FVIP the participant is transferring from shall notify the victim liaison of the participant's transfer within four (4) calendar days. FVIPs who accept transferred participants must complete all procedures required of new participants.
7. All participants in a class must be of the same gender identity.
8. Intimate or ex-intimate partners are not allowed to participate in the same class.

Prohibited Class Activities

1. FVIPs shall not give participants credit for anger management, DUI, or any other class for attending an FVIP class, nor shall an FVIP give participants credit for attending an anger management, DUI or any other class.
2. FVIPs shall not allow participants to provide personal favors in lieu of class fees or attendance.
3. FVIPs shall not require or permit victims to attend or participate in orientation, application interview, class, or FVIP activities in any way.
4. FVIPs shall not permit participants to violate any FVIP rules, procedures, or participant contract requirements without escalating consequences up to and including termination from the program.

I have read and agree to the program structure requirements.

Name of Program Owner or ED	Signature of Program Owner or ED	Date

VICTIM LIAISON & CURRICULUM STANDARDS

Do you have an Internal Victim Liaison?	☐ Yes ☐ No
Internal Victim Liaison Name:	
Internal Victim Liaison Phone:	
Internal Victim Liaison Email:	
Do you have a contract with a CJCC Certified DV Program?	☐ Yes ☐ No
Victim Liaison Organization:	
Contact Name & Title:	
Contact Email & Phone:	

Mandatory Notification Timelines:

- **Enrollment:** Send Victim Contact Request to Victim Liaison and Status Update form to Referral Source within **5 calendar days**.
- **Transfer:** Notify Victim Liaison and Referral Source within **4 calendar days** of approval.
- **Completion:** Notify all referral sources and victim liaison within **4 calendar days**.
- **Termination:** Notify all referral sources and victim liaison immediately if due to threats/violence; notify all within **2 calendar days**. Notice of intent to terminate **2 days prior** when possible.

Curriculum Attestation

Men's Class Curriculums Used:	
Women's Class Curriculums Used:	

I attest that the curriculums used to facilitate FVIP classes meet all GCFV minimum standards including Power and Control models, Beliefs & Social Context, and Effects of Abuse.

REPORTING AND RECORDKEEPING REQUIREMENTS

Monthly Reporting and Payment Requirements to the Commission

FVIPs shall report to the Commission the following information once a month through the Commission designated reporting system:

1. New and updated locations and format where classes are being held.
2. New and updated class schedules, including the day, time, type of class, and certified facilitator(s) assigned to the class.
3. Participants must be entered into the reporting system by the tenth day of the following month for which they enrolled or re-enrolled in the program.
4. Participants who have completed, transferred or been terminated from the program by the tenth day of the following month.
5. FVIPs must report if they had no new participants for the previous month.

Participant Fee Requirements

1. Each FVIP will be assessed a $20.00 fee for each participant that is payable to the Commission within thirty (30) calendar days of issuance of an invoice. The Program shall enter the participant into the Commission designated reporting system by the tenth day of the following month when the participant enrolled.
2. If a participant re-enrolls in an FVIP after being previously terminated by that FVIP, the FVIP shall be assessed an additional $20.00 fee for the participant payable to the Commission within thirty (30) calendar days of receiving an invoice. The FVIP shall enter the participant into the reporting system by the tenth day of the following month when the participant re-enrolled.
3. If payment is not submitted within thirty (30) calendar days, the FVIP shall be charged the following late fees:
    - **After forty-five (45) calendar days:** A $30 late fee will be added to the outstanding invoice.
    - **After sixty (60) calendar days:** An additional $30 late fee will be added to the outstanding invoice (total $60 in late fees).
    - **After ninety (90) calendar days:** An additional $30 late fee will be added to the outstanding invoice (total $90 in late fees and a Notice of Deficiency - NOD).

Recordkeeping Requirements

A record of the following shall be kept by the Program for all participants for three (3) years. The Commission has the authority to review these documents upon request.

1. Participant Intake and Application Forms
2. Participant Assessment Forms
3. Victim Liaison Contacts & Notifications
4. Referral Contacts & Notifications
5. Participant Attendance Records
6. Participant Payment to the FVIP
7. Participant Reporting and Payment to the Commission

I have read and agree to the reporting and recordkeeping requirements.

Name of Program Owner or ED	Signature of Program Owner or ED	Date

PRINCIPLES OF PRACTICE

Each applicant shall submit a signed copy of the Principles of Practice. FVIPs shall adhere to the following Principles of Practice, incorporate them into their program's policy and procedure manual, submit a signed copy to the Commission upon recertification, and prominently display them in the program facility.

1. **FVIP Providers are advocates for victims of domestic violence** who work to hold participants accountable for their acts of domestic violence. The highest priorities of FVIP Providers and Facilitators are the safety, rights, and confidentiality of victims.
2. **FVIP Providers advocate that offenders of domestic violence be held accountable.** FVIP Providers and Facilitators should never collude with participants to minimize, tolerate, or justify abusive and unacceptable behavior.
3. **FVIP Providers consult with victim advocates** to ensure quality programming.
4. **FVIP Providers consistently act and communicate** in ways that do not perpetuate discriminatory behavior, attitudes, or bias. FVIP Providers and Facilitators treat all with dignity.

5. **FVIP Providers are not legal advocates or witnesses** on behalf of participants and shall use caution when responding to requests for assessments, impressions, opinions, information, or testimony. FVIP Providers will not state or imply that program completion will result in non-abusive behaviors or victim safety.
6. **Anger management programs, couples counseling, and psychotherapy are not appropriate interventions for domestic violence** and may place the victim at heightened risk. Ending violence and abuse and prioritizing victims' safety takes precedence over efforts to save relationships.
7. **Educational group sessions must be the primary approach to domestic violence intervention.** However, Providers may find participants would benefit from additional interventions separately, including but not limited to substance abuse treatment, addiction treatment, mental or behavioral health treatment, parenting class, or individual therapy, but only in addition to participation in an FVIP. The FVIP Provider may notify the appropriate court or referral source of any recommendation in such instances.
8. **FVIPs alone do not create accountability.** FVIP Providers and Facilitators collaborate with community partners and participate in a larger coordinated community response to domestic violence.

Name of Program Owner or ED _____ Signature of Program Owner or ED _____ Date _____

VERIFICATION OF LAWFUL PRESENCE

Consistent with the Illegal Immigration Reform and Enforcement Act of 2011 (O.C.G.A. § 50-36-1(e)), effective January 1, 2012, persons applying for certification or certification renewal on behalf of a Family Violence Intervention Program (FVIP) with the Georgia Commission on Family Violence must verify their lawful presence in the United States.

Therefore, before your FVIP certification can be issued or renewed, you as the FVIP program owner, or an authorized agent of the owner, are required to:

1. Provide a copy of a secure and verifiable document issued to you by a state or federal jurisdiction or recognized by the United States government and that is verifiable by federal or state law enforcement, intelligence, or homeland security agencies. A listing of acceptable secure and verifiable documents, as determined by the Office of the Attorney General, Georgia, can be found here: https://law.georgia.gov/.../Secure_and_Verifiable_Documents.pdf
2. Execute a signed and sworn affidavit verifying your lawful presence in the United States. Please use the following affidavit for this purpose. The two documents above, as described within this section, must be submitted to the Georgia Commission on Family Violence along with all other application materials in order for your FVIP program to be certified or renewed.

O.C.G.A. § 50-36-1(e)(2) Affidavit

By executing this affidavit under oath, as an applicant for initial certification or renewal of certification on behalf of (entity name) _____, as referenced in O.C.G.A. § 50-36-1, from the Georgia Commission on Family Violence, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

1) ☐ I am a United States citizen.
2) ☐ I am a legal permanent resident of the United States.
3) ☐ I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency. My alien number issued by the Department of Homeland Security or other federal immigration agency is: _____

The undersigned applicant also hereby verifies that he or she is 18 years of age or older, is the FVIP program owner, or an authorized agent of the owner, and has provided at least one secure and verifiable document, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:
_____.

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in _____ (city), _____ (state).

Signature of Applicant _____ Printed Name of Applicant _____

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE _____ DAY OF _____, 20____

NOTARY PUBLIC _____ My Commission Expires _____

ACKNOWLEDGEMENTS

Initial	Acknowledgement Statement
_____	**Adherence to Program Standards, Policies, and Procedures** I have read the updated Family Violence Intervention Program Rules in their entirety and agree that the FVIP will adhere to all program standards, policies, and procedures contained therein that apply to this organization's certification as an FVIP.
_____	**Limitations on Eligibility for Certification** I am not and have never been a perpetrator of family or domestic violence. I do not have any family violence charges within the past five (5) years. If I have been charged with family or domestic violence within five (5) years, I will show proof that I have successfully completed a certified FVIP within that last two (2) years. I am not under any form of community supervision, administrative or otherwise, by any law enforcement agency or county, state or federal authority. This includes, but is not limited to, any form of misdemeanor or felony probation, pre-trial diversion, or parole. My status as owner, executive director of an FVIP program poses no actual, potential, or apparent conflict of interest. I am in no position to exert undue influence, exploit, or take undue advantage of any participants.
_____	**Notification to GCFV of Criminal History and Orders of Protection** I will report to the Commission by the next business day after release any arrest. I will report to the Commission any temporary protection or stalking orders of which they are a respondent by the next business day after service of the order.
_____	**Certification Dates** I understand that programs receive a two (2) year certification period.
_____	**Participation in Local Coordinated Community Response** I will participate in the Community Task Force on Family Violence and be a part of the coordinated community response to domestic violence in every judicial circuit in which my program is certified. Evidence of my participation in two (2) coordinated community response meetings annually will be submitted to the Commission upon recertification. If no such body exists, I will attend other family violence community meetings for this requirement or may request from the Commission these hours be met through domestic violence court observations, law enforcement ride-alongs, or volunteering with a domestic violence advocacy program.
_____	**Current Mailing, Virtual Class Meeting Link(s) and Email Address** I will submit and maintain my current mailing address, virtual class meeting link(s) and email address with the Commission as any and all correspondence will be sent to the mailing address and email address on file.

I have read and agree to all above statements and acknowledgments.

Name of Program Owner or ED	Signature of Program Owner or ED	Date