**Applicant:** Click here to enter text.

**Project Name:** Click here to enter text.

*Please provide a narrative detail for all grant-funded budget line items listed on Exhibit F - Budget Summary*

**A. (A-D) Staff Salaries:** Total Salaries Paid + Benefits (WIOA 15%) $­­­­­­­­­­\_\_\_\_\_\_\_\_\_

| **Position** | **FTE x Monthly Salary x Time** | **Benefits** | **Total (FTE X Salary X Time) + Benefits** |
| --- | --- | --- | --- |
|       |       |        |       |
|       |       |        |       |
|       |       |        |       |
|       |       |  |       |
|       |       |  |       |

**E. Staff Travel** $­­­­­­­­­­\_\_\_\_\_\_\_\_\_

*Describe details.*

**F. Operating Expenses** $­­­­­­­­­­\_\_\_\_\_\_\_\_\_

The following are some of the major line items included:

|  |  |
| --- | --- |
| Expense | Cost |
| Rent\*  | $      |
| Insurance | $      |
| Accounting (payroll services) and Audits | $      |
| Consumable office supplies\* | $      |
| Printing | $      |
| Communications (phones, web services, etc.)\* | $      |
| Mailing and Delivery | $      |
| Dues and Memberships\* | $      |
| Outreach | $      |

\*(based on FTE for program staff)

**G. Furniture and Equipment\*** $­­­­­­­­­­\_\_\_\_\_\_\_\_\_

1. Small Amount of Equipment and Furniture $\_\_\_\_\_\_\_\_\_

*Pooled items less than $5,000 per unit, lease or purchase, include a cost allocation - List name of item, cost, and quantity.*

2. Large Amount of Equipment and Furniture $\_\_\_\_\_\_\_\_\_

*Greater than $5,000: List name of item, cost, and quantity to be purchased - prior approval required and added to Exhibit G, Supplemental Budget*

*\*Refer to EDD Directives WSD16-16 - WSD16-10 – WSD17-08 for Procurement Guidelines*

3. Equipment Lease $\_\_\_\_\_\_\_\_\_

*Describe the calculation.*

**H. Consumable Testing and Instructional Materials** $­­­­­­­­­­\_\_\_\_\_\_\_\_\_

*Explain purpose and planned use.*

**I. Tuition, Payments/Vouchers** $­­­­­­­­­­\_\_\_\_\_\_\_\_\_

*Detail costs for (name) programs and sector-specific training and certificate programs at (organization), as well as training costs for outside training providers (organization/location).*

**J. On-The-Job Training** $­­­­­­­­­­\_\_\_\_\_\_\_\_\_

*Employer reimbursements for training by an employer that is provided to a paid participant while engaged in productive work in a job that:*

*a) provides knowledge or skills essential to the full and adequate performance of the job;*

*b) is made available through a program that provides reimbursement to the employer of up to 50 percent of the wage rate of the participant, except as provided in section 134(c)(3)(H) of the WIOA Final Rule, for the extraordinary costs of providing the training and additional supervision related to the training; and*

*c) is limited in duration as appropriate to the occupation for which the participant is being trained, taking into account the content of the training, the prior work experience of the participant, and the service strategy of the participant, as appropriate.*

*List employers and industries partnering in the OJTs.*

**K. Participant Wages and Fringe Benefits** $­­­­­­­­­­\_\_\_\_\_\_\_\_\_

*State planned number of participants to receive wages and benefits and give detail of Work Experience or Transitional Jobs.*

**L. Supportive Services** $­­­­­­­­­­\_\_\_\_\_\_\_\_\_

*Gas cards, bus passes, housing, or any additional immediate assistance not available through any other source. Describe the specific services you will provide.*

**M. Contractual Services** $­­­­­­­­­­\_\_\_\_\_\_\_\_\_

*Describe.*

*(Example. Biocom Institute will seek a contractor to provide web development and salesforce integration support to build the Veterans in Life Science Virtual Network (VLSVN). The contract amount will not exceed $20,000. Biocom Institute will contract with Karmin Noar to serve as Interim Executive Director and Project Manager for the Gateway to Life Science Careers for Veterans project with a monthly bill rate of $10,833.)*

**N. Indirect Costs** $­­­­­­­­­­\_\_\_\_\_\_\_\_\_

*Must have an approval of Cognizant Agency.*

**O. Other** $­­­­­­­­­­\_\_\_\_\_\_\_\_\_

*Clearly explain these costs, which do not fit into the specific categories above.*