CAL-E-GRANTS REFERENCE GUIDE: WORKFORCE ACCELERATOR FUND APPLICATION NEW ACCELERATOR PROJECT

You must first log in to the system in order to apply for funding. Please refer to the **New User Registration** reference material for step-by-step procedures on how to become a user of the Cal-E-Grants system

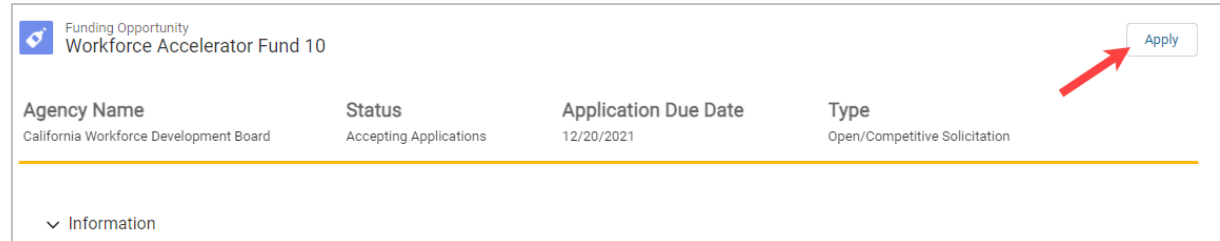|	
1. From the Cal-E-Grants landing page, select the large **CWDB** button	
2. Click the **Workforce Accelerator Fund 10** link from the Funding Opportunities list	

3. Select the **Apply** button at the top right of the page
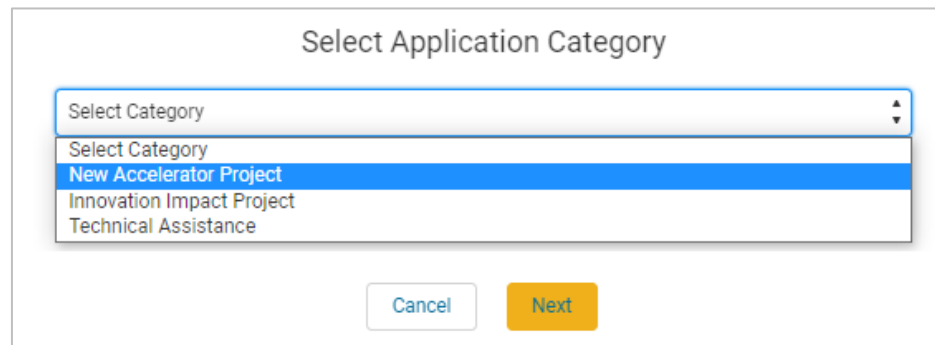
Funding Opportunity **Workforce Accelerator Fund 10**	Apply

Agency Name	Status	Application Due Date	Type
California Workforce Development Board	Accepting Applications	12/20/2021	Open/Competitive Solicitation

⌄ Information

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4. Select **New Accelerator** from the Application Category drop down list. Once selected, click **Next**
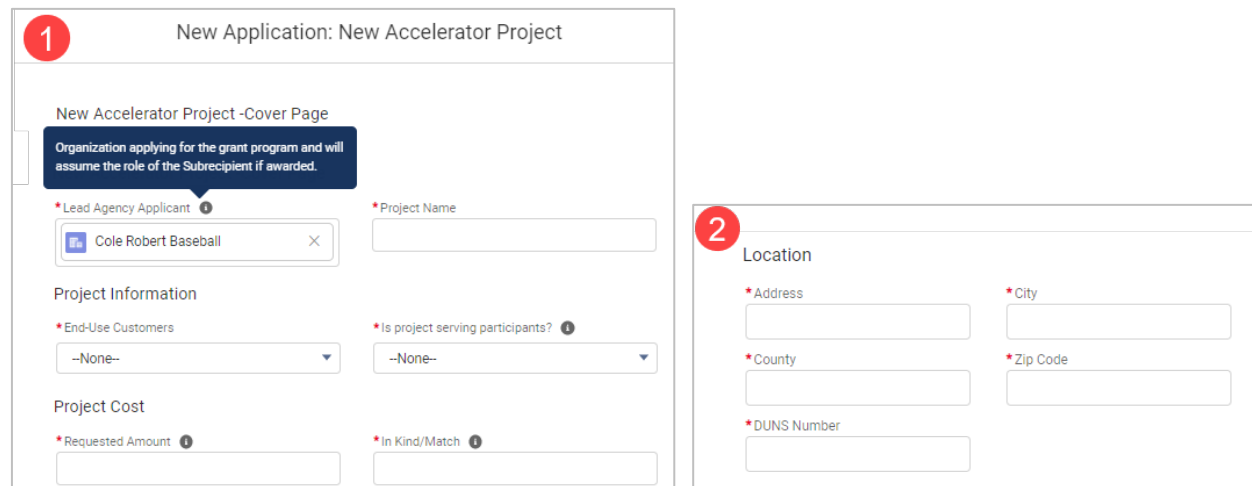
Select Application Category

Select Category ▲▼

Select Category
New Accelerator Project
Innovation Impact Project
Technical Assistance

Cancel   Next

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5. Fill out the cover page for the Technical Assistance Application. The Lead Agency Applicant will pre-populate with the company name provided as user registration. Required fields are noted with a red asterisk (*)

Note: Circles with an "i" in them are help bubbles. Hovering over them will cause help text to appear to assist in any definitions of fields

① New Application: New Accelerator Project

New Accelerator Project -Cover Page

Organization applying for the grant program and will assume the role of the Subrecipient if awarded.

*Lead Agency Applicant ⓘ
Cole Robert Baseball ✕

*Project Name

Project Information

*End-Use Customers
--None-- ▼

*Is project serving participants? ⓘ
--None-- ▼

Project Cost

*Requested Amount ⓘ

*In Kind/Match ⓘ

② Location

*Address

*City

*County

*Zip Code

*DUNS Number

6. Enter in the point of contact. The contact fields are lookup fields. Type in any users that are already signed up in Cal-E-Grants within your account and they will appear in a drop down list below the field. If you need to add a contact that is not yet a user of the system, click **New Contact**

This will cause the new contact form to appear. Fill out any required fields and click **Save** to save the contact

Once the contact has been saved, they will prepopulate in the contact field

3 Points of Contact

*Primary Contact ⓘ

Search Contacts... 🔍

🖾 Test Contact

＋ New Contact ⬅

*Fiscal Contact

Search Contacts... 🔍

3.1 New Contact: GMS Applicant Contact

Contact Information

*Name
Salutation
--None-- ▼
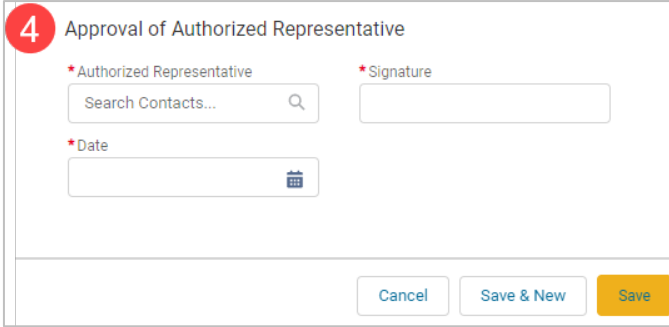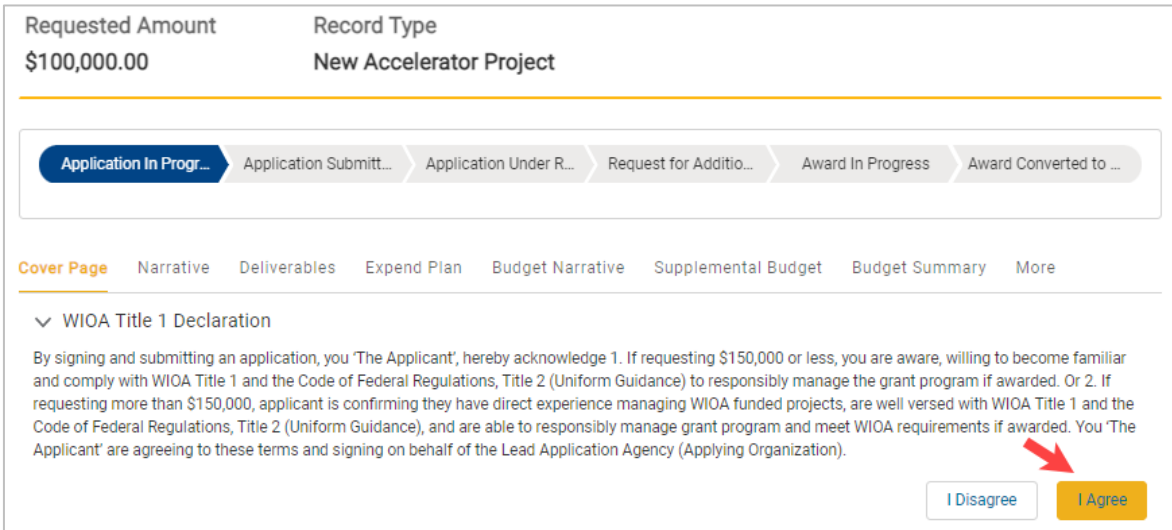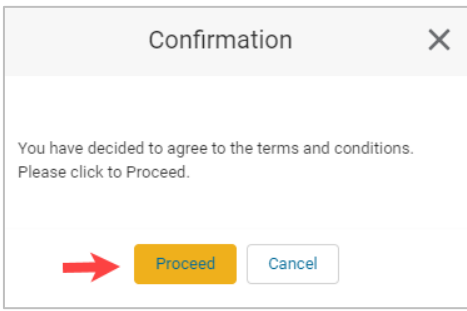
First Name

*Last Name

*Title

*Phone

Account Name
Search Accounts... 🔍

*Email

Cancel | Save & New | Save

7. Fill out the Approval of Authorized Representative section. Click **Save** when the cover page is finished *Note: **Signature** is a typed field and **Date** must be today or in future, the field will not accept past dates*	**④ Approval of Authorized Representative** *Authorized Representative Search Contacts... 🔍 *Signature *Date 🗓 Cancel Save & New Save
8. You will be taken to the application page. The amount requested and Application Type will appear at the top of the page. The status bar will reflect "Application in Progress" and you will be on the Cover Page area of the application In order to proceed with the application, click **I Agree** after reading the WIOA Title 1 Declaration	Requested Amount $100,000.00 Record Type New Accelerator Project Application In Progr... ▸ Application Submitt... ▸ Application Under R... ▸ Request for Additio... ▸ Award In Progress ▸ Award Converted to ... Cover Page Narrative Deliverables Expend Plan Budget Narrative Supplemental Budget Budget Summary More ∨ WIOA Title 1 Declaration By signing and submitting an application, you 'The Applicant', hereby acknowledge 1. If requesting $150,000 or less, you are aware, willing to become familiar and comply with WIOA Title 1 and the Code of Federal Regulations, Title 2 (Uniform Guidance) to responsibly manage the grant program if awarded. Or 2. If requesting more than $150,000, applicant is confirming they have direct experience managing WIOA funded projects, are well versed with WIOA Title 1 and the Code of Federal Regulations, Title 2 (Uniform Guidance), and are able to responsibly manage grant program and meet WIOA requirements if awarded. You 'The Applicant' are agreeing to these terms and signing on behalf of the Lead Application Agency (Applying Organization). I Disagree I Agree
9. A pop up will appear confirming your choice to agree with the WIOA Title 1 Declaration. Click **Proceed** to continue	Confirmation ✕ You have decided to agree to the terms and conditions. Please click to Proceed. Proceed Cancel

10. You will return to the cover page. Review the information on the page. If any edits to information are needed, click the pencil icon to the right of the field	∨ New Accelerator Project -Cover Page Lead Agency Applicant ⓘ Cole Robert Baseball ∨ Project Information End-Use Customers Job Seeker ∨ Project Cost Requested Amount ⓘ $100,000.00 Total Project Budget $200,000.00
11. To move to the next area of the application, click **Narrative** from the Navigation Bar	Application In Progr... → Application Submitt... → Application Under R... → Request for Additio... → Award In Progress → Award Converted to ... **Cover Page** Narrative Deliverables Expend Plan Budget Narrative Supplemental Budget Budget Summary More
12. At the top of the narrative tab are directions on how to fill out the sections of this page. There is also a link to the Workforce Accelerator Fund Webpage which provides comprehensive application instructions	Cover Page **Narrative** Deliverables Expend Plan Budget Narrative Supplemental Budget More In the space provided, using the prompts below, please provide details relative to the Project's Proposed Framework, Project Team, and your organizations' experience with WIOA funded grant programs and the projects' Proposed Strategies. For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.

13. Fill in all the fields in *Section 1: Project Framework*. There are 4 narrative questions total in this section. All fields are required at time of submittal

Question 4 is a conditional question. Utilize the arrows to move applicable questions into the Selected pane to display conditional questions below

Note: For example, If "Improvement of Job Quality" is selected you would be required to answer Question 4.1

Text entry boxes are larger in the system; they have been cut down for the purpose of these training materials.

① Section I. Project Framework

Question - 1

Identify project's Big Idea:

Question - 2

Describe the innovation process and how project is uniquely designed to address the Big Idea – the identified opportunity for improvement and change impacting economic and racial equity – in workforce development:

Question - 3

Funding through the Accelerator 10 grant program will further this by:

Question - 4

How will the project's Big Idea address at least one of the core High Road elements: ⓘ

Available:
- Improvement of Job Quality
- Create Income Security or Upward Mobility
- Connect or Bridge Workforce Programs to Quality Jobs

Selected:

② Question - 4

How will the project's Big Idea address at least one of the core High Road elements: ⓘ

Available:

Selected:
- Improvement of Job Quality
- Create Income Security or Upward Mobility
- Connect or Bridge Workforce Programs to Quality Jobs

Question - 4.1

Improvement of Job Quality

Question - 4.2

Create Income Security or Upward Mobility

Question - 4.3

Connect or Bridge Workforce Programs to Quality Jobs

14. Fill in all the fields in *Section 2: Subrecipient & Project Team*. There are 6 narrative questions total in this section. This field is required at time of submittal

③ Section II. Subrecipient & Project Team

Question - 1

Subrecipient (organization applying for funding): The Workforce Accelerator Fund is a WIOA funded grant program and all awarded organizations must meet and comply with WIOA Title 1 and the Code of Federal Regulations, Title 2 (Uniform Guidance) to responsibly manage the grant program. Describe your experience and capacity in managing WIOA funds:

Available

If no experience managing WIOA funded grant programs, describe how organization will operate this grant program and become familiar with WIOA requirements to responsibly manage funds and comply

Selected

Describe direct experience and success in managing WIOA funded grant programs

Question - 1.1

Describe direct experience and success in managing WIOA funded grant programs:

Question - 2

Clearly identify at least one unique individual for the Customer role including name, organization, how their experience and success in that capacity will benefit the project.

Question - 3

Clearly identify at least one unique individual for the Expert role including name, organization, how their experience and success in that capacity will benefit the project.

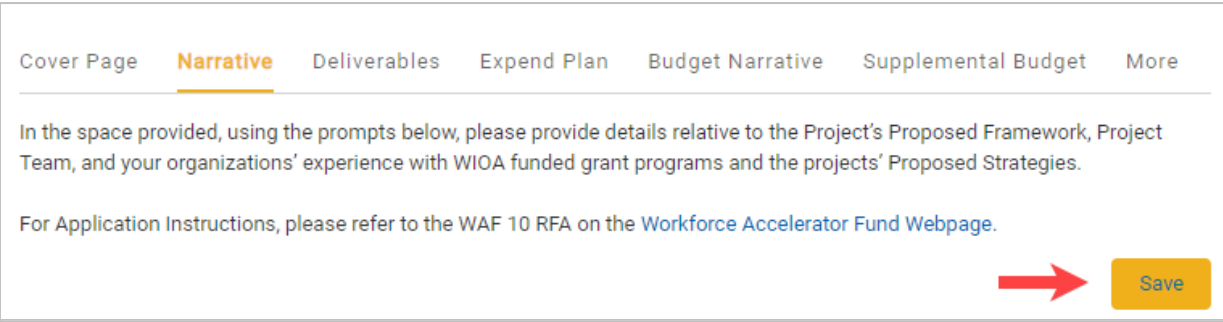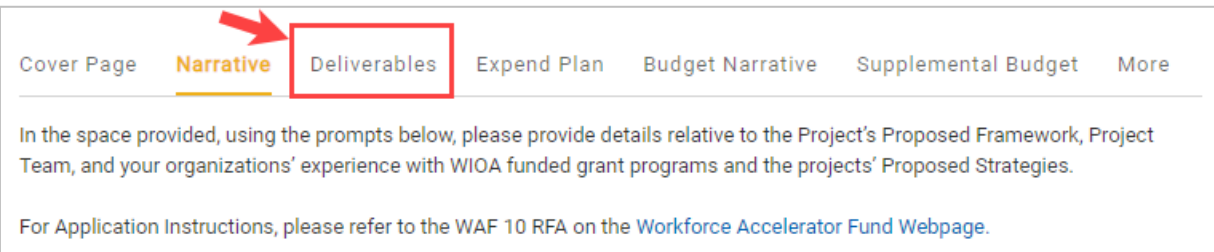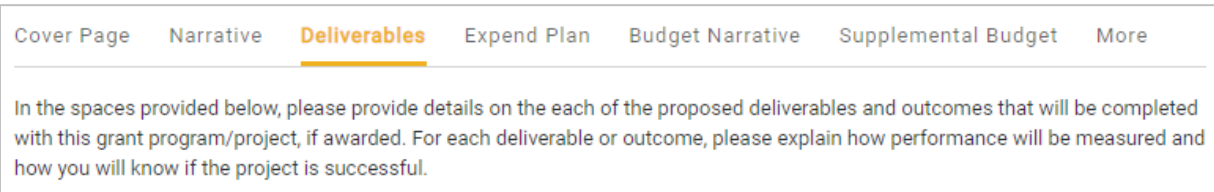**④ Question - 4**

Clearly identify at least one unique individual for the Innovator role including name, organization, how their experience and success in that capacity will benefit the project.

Question - 5

Clearly identify at least one unique individual for the Influencer role including name, organization, how their experience and success in that capacity will benefit the project.

Question - 6

Describe Project Team's commitment to integration, sharing, and replication and/or scaling of successful outcomes.

15. When you have finished entering information in the narrative area, navigate to the top of the page and click **Save** *Note: Be sure to click **Save** in each area after entering in information. If you exit the system, or if it times out due to being idle, you will lose the information entered in the fields unless **Save** has been clicked*	Cover Page **Narrative** Deliverables Expend Plan Budget Narrative Supplemental Budget More In the space provided, using the prompts below, please provide details relative to the Project's Proposed Framework, Project Team, and your organizations' experience with WIOA funded grant programs and the projects' Proposed Strategies. For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage. Save
16. To move to the next area of the application, click **Deliverables** in the Navigation Bar	Cover Page **Narrative** Deliverables Expend Plan Budget Narrative Supplemental Budget More In the space provided, using the prompts below, please provide details relative to the Project's Proposed Framework, Project Team, and your organizations' experience with WIOA funded grant programs and the projects' Proposed Strategies. For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.
17. At the top of the Deliverables tab are directions on how to fill out the sections of this page	Cover Page Narrative **Deliverables** Expend Plan Budget Narrative Supplemental Budget More In the spaces provided below, please provide details on the each of the proposed deliverables and outcomes that will be completed with this grant program/project, if awarded. For each deliverable or outcome, please explain how performance will be measured and how you will know if the project is successful.

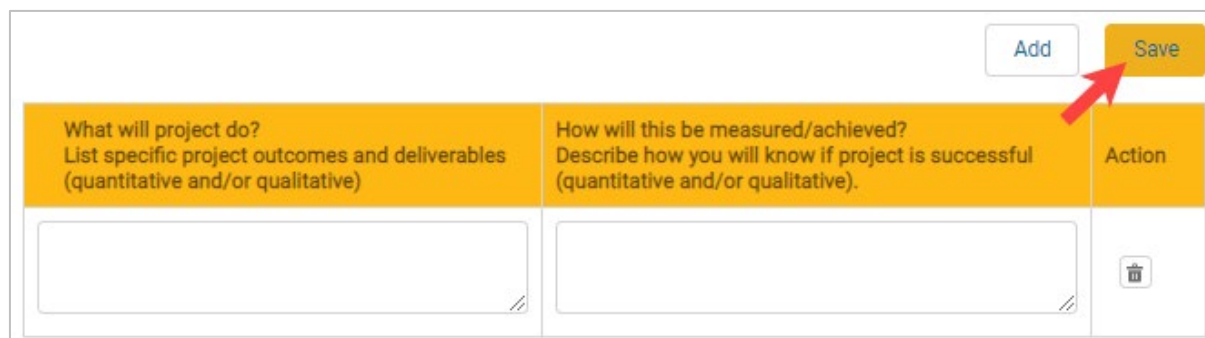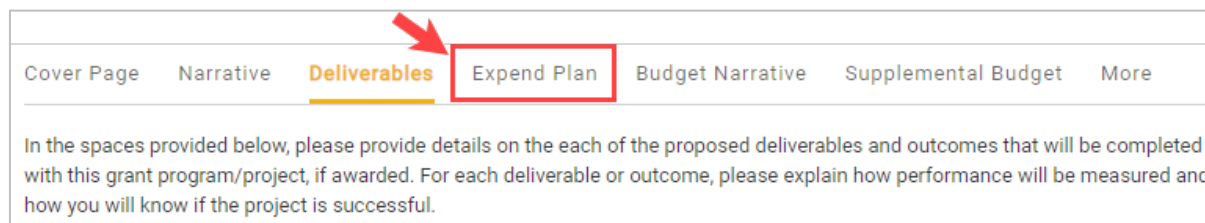|	
18. Fill in all the fields in the 1 Section. All fields are required at time of submittal *Note: To add any additional deliverable lines; click the Add button at the top of the section.* To delete any extra rows, select the trash icon to the right of the fields.	
19. When you have finished entering information in the narrative area, navigate to the top of the page and click **Save** *Note: Be sure to click **Save** after entering in information. If you exit the system, or if it times out due to being idle, you will lose the information entered in the fields unless **Save** has been clicked*	
20. To move to the next area of the application, click **Expend Plan** in the Navigation Bar	

21. At the top of the Expend Plan tab are directions on how to fill out the sections of this page. There is also a link to the Workforce Accelerator Fund Webpage, which provides comprehensive application instructions.

Note: Technical Assistance applicants are not required to provide match funds. Leave those fields blank

| Cover Page | Narrative | Deliverables | **Expend Plan** | Budget Narrative | Supplemental Budget | More |

In the spaces provided below, in Section I. Funding Plan: Please provide figures for Total Administration (cannot exceed 10% of Total Subgrant/Amount Requested), Total Program Cost (Requested Award Amount minus Administration Costs), and the amount of Leveraged/Match Funds. In Section II. Expenditure Plan: Applicant must project quarterly spending projections for both grant funds and leveraged funds/match. Quarterly Planned Expenditures refers to the amount of funding applicant is requesting from the CWDB. Quarterly Planned Match refers to leveraged funds as match contribution.

For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.
NOTE: Technical Assistance applicants are not required to provide match.

Quarter/Schedule for WAF 10:
Quarter 1: June 01, 2022
Quarter 2: July 01, 2022 - September 30, 2022
Quarter 3: October 01, 2022 - December 31, 2022
Quarter 4: January 01, 2023 - March 31, 2023
Quarter 5: April 01, 2023 - June 30, 2023
Quarter 6: July 01, 2023 - September 30, 2023
Quarter 7: October 01, 2023 - December 31, 2023

NOTE: The first month of the grant period falls in the quarter 1. Please enter any June 2022 activities here.

Fill in all the fields in *Section 1: Funding Plan*.

Note: The Total Subgrant Amount in the Grant Funds column should total the amount requested. The Project total should equal the project budget

1

I. FUNDING PLAN   [Save]

Fund Source	Grant Funds (WIOA 15%)	Leveraged Funds (Match)	Project Total
Total Administration - 10% Cap	$0.00	$0.00	$0.00
Total Program Cost	$0.00	$0.00	$0.00
Total Subgrant Amount	$0.00	$0.00	$0.00

22. Fill in all the fields in *Section 2: Expenditure*. There are 7 quarters required in this section. There are 7 quarters required in this section. Enter data in the white fields. The gray fields calculate automatically

    Note: The Total at the bottom of Quarterly Planned Expenditures column should total the total the amount requested and the Total at the bottom of Project Total Planned Expenditures should total the project budget

II. EXPENDITURE PLAN

Quarter/Year	Quarterly Planned Expenditures	Cumulative Planned Expenditures	Quarterly Planned Match	Cumulative Planned Match	Project Total Planned Expenditures
Quarter 1	$0.00	$0.00	$0.00	$0.00	$0.00
Quarter 2	$0.00	$0.00	$0.00	$0.00	$0.00
Quarter 3	$0.00	$0.00	$0.00	$0.00	$0.00
Quarter 4	$0.00	$0.00	$0.00	$0.00	$0.00
Quarter 5	$0.00	$0.00	$0.00	$0.00	$0.00
Quarter 6	$0.00	$0.00	$0.00	$0.00	$0.00
Quarter 7	$0.00	$0.00	$0.00	$0.00	$0.00
Total	$0.00	$0.00	$0.00	$0.00	$0.00

23. When you have finished entering information in the narrative area, navigate to the top of the page and click **Save**

    *Note: Be sure to click **Save** after entering in information. If you exit the system, or if it times out due to being idle, you will lose the information entered in the fields unless **Save** has been clicked*

I. FUNDING PLAN   Save

Fund Source	Grant Funds (WIOA 15%)	Leveraged Funds (Match)	Project Total
Total Administration - 10% Cap	$0.00	$0.00	$0.00
Total Program Cost	$0.00	$0.00	$0.00
Total Subgrant Amount	$0.00	$0.00	$0.00

24. To move to the next area of the application, click **Budget Narrative** in the Navigation Bar	Cover Page Narrative Deliverables **Expend Plan** Budget Narrative Supplemental Budget More
25. At the top of the Budget Narrative tab are directions on how to fill out the sections of this page. There is also a link to the Workforce Accelerator Fund Webpage, which provides comprehensive application instructions.	Cover Page Narrative Deliverables Expend Plan **Budget Narrative** Supplemental Budget More In the spaces provided below, please provide details relative to proposed total line item allocations. Figures in this section should mirror exactly each line item in the Grant Funds (15% WIOA) column on Budget Summary. This tab/section accounts for grant funds only – do not include leveraged funds (match). Enough detail should be provided to justify each line item allocation. Each line item contains information/specific details on the actual exhibit that must be covered in the narrative response. If there are multiple costs within a line item each cost must be covered separately with individual details and costs outlined, totaling to the full line item allocation. Failure to provide adequate detail may result in a lower score. For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.

26. Fill in all applicable fields in each section of the Budget Narrative Page. There are 13 sections total in this area.

    *Note: If additional rows are needed, click the **Add** button within each application section. If additional rows need to be removed, click the **Trash** icon to the right of the row.*

Staff Salaries   [Add]

Job Titles of Staff & Roles and Responsibilities	FTE	Monthly Salary	Months	Total Salary		Benefits	Benefit %	Total Staff Salaries + Benefits	Action
	0.00	$0.00	0	$0.00		$0.00		$0.00	🗑
		Total Salary		$0.00	Total Benefits	$0.00			
					Staff Salaries & Benefits Total			$0.00	

Staff Travel
List staff traveling, destination/event, and of transportation*
Note: Staff Travel is for employees of the subrecipient entity only. Anyone else listed under Staff Travel would be an unallowable cost. Contractors should budget their own travel into their contracts and cannot be included under subrecipient entity travel costs. $0.00   [Add]

	$0.00	🗑

Operating Expenses
Provide breakdown of operating expenses in each of the major line items below (if applicable)
*Based on FTE for Program Staff $0.00   [Add]

Rent*		$0.00

27. Throughout the Budget Narrative, there are blue links within select sections that will open a new tab with any applicable directives or regulations to that section

Training Tuition Payments/Vouchers
Detail costs for programs and sector-specific training and certificate programs (include name of organization), as well as training costs for outside training providers (organization/location)
For all training (and OJTs below), read Training Services: CFR 690.200 - Training Services $0.00   [Add]

	$0.00	🗑

28. Once all applicable fields have been entered, the Grand Award Total will have auto calculated from the above fields. It <u>must</u> match the total amount requested	**Other (describe)** Explain these costs, which do not fit into the specific line item categories above. $0.00 [Add] $0.00 [🗑] Grand Award Total $0.00
29. When you have finished entering information in the narrative area, navigate to the top of the page and click **Save** *Note: Be sure to click **Save** after entering in information. If you exit the system, or if it times out due to being idle, you will lose the information entered in the fields unless **Save** has been clicked*	Cover Page Narrative Deliverables Expend Plan **Budget Narrative** Supplemental Budget More In the spaces provided below, please provide details relative to proposed total line item allocations. Figures in this section should mirror exactly each line item in the Grant Funds (15% WIOA) column on Budget Summary. This tab/section accounts for grant funds only – do not include leveraged funds (match). Enough detail should be provided to justify each line item allocation. Each line item contains information/specific details on the actual exhibit that must be covered in the narrative response. If there are multiple costs within a line item each cost must be covered separately with individual details and costs outlined, totaling to the full line item allocation. Failure to provide adequate detail may result in a lower score. For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage. [Save]
30. To move to the next area of the application, click **Supplemental Budget** in the Navigation Bar	Cover Page Narrative Deliverables Expend Plan **Budget Narrative** Supplemental Budget More In the spaces provided below, please provide details relative to proposed total line item allocations. Figures in this section should mirror exactly each line item in the Grant Funds (15% WIOA) column on Budget Summary. This tab/section accounts for grant funds only – do not include leveraged funds (match). Enough detail should be provided to justify each line item allocation. Each line item contains information/specific details on the actual exhibit that must be covered in the narrative response. If there are multiple costs within a line item each cost must be covered separately with individual details and costs outlined, totaling to the full line item allocation. Failure to provide adequate detail may result in a lower score. For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.

31. At the top of the Supplemental Budget tab are directions on how to fill out the sections of this page. There is also a link to the Workforce Accelerator Fund Webpage, which provides comprehensive application instructions.	Cover Page Narrative Deliverables Expend Plan Budget Narrative **Supplemental Budget** More If grant funds are used for Equipment Purchase, Leased Equipment, Contractual Services, and/or Subrecipient, Supplemental Budget must be completed. Instructions, guidance, and resources are outlined within the tab/sections below. Please note: The solicitation/application process does not act as procurement nor does it waive state and federal procurement rules and requirements. All contractual services must be competitively procured in accordance with federal and state procurement regulations and policies and type of procurement must be outlined on the Supplemental Budget. For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.
32. Fill in all applicable fields in *Section 1: Equipment* *Note: There are blue links at the top of each section that will open a new tab with any applicable directives or regulations pertaining to that section.* *If additional rows are needed, click the **Add** button within each application section. If additional rows need to be removed, click the **Trash** icon to the right of the row.* *Click the **Save** button when finished entering information in this section*	**1** **I. Equipment** List equipment items with a useful life of more than one year and/or with a unit acquisition cost of $5,000 or more charged to the project. Reference WSD 16-16, WSD 16-10, and WSD 17-08 for equipment purchases. The approval of the budget plan contained in the subgrant does not constitute approval of the purchase of equipment or request. A separate request to purchase equipment must be submitted to the state for prior approval. If leasing equipment is being considered, it must be include in the procurement analysis. See Leasing Info link below. [Add] [Save] Allowable Costs & Prior Written Approval WSD 16-16 Property - Purchasing, Inventory, and Disposal WSD 16-10 Procurement of Equipment and Related Services WSD 17-08 Leasing Info FAR 7.400

Table for Section 1: Equipment:

Item Description	Cost Per Item	Quantity	Total Cost	% Charged to Project	Total Cost Charged to Project	Action
						🗑
TOTAL		$0.00	$0.00		$0.00	

33. Fill in all applicable fields in *Section 2: Contractual Services*

    Note: There are blue links at the top of each section that will open a new tab with any applicable directives or regulations pertaining to that section.

    *If additional rows are needed, click the **Add** button within each application section. If additional rows need to be removed, click the **Trash** icon to the right of the row.*

    *Click the **Save** button when finished entering information in this section*

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2 Subrecipients and Contractors - Prior to completing Section II and III, review WSD 18-06 to distinguish between the two.

Subrecipient and Contractor Distinctions WSD 18-06

II. Contractual Services - Providing Goods or Services that are required to conduct a federal program. **If procurement needs to occur and TBD, provide selection timeframe.

All contractual services must be competitively procured in accordance with federal and state procurement regulations and policies. See Procurement Standards (Sect. 200.318) in the Federal Uniform guidance, 2CFR200.

[Add] [Save]

CFR 200.318   WSD 17-08

Description - Type of Service	Cost	Service Provider	Type of Procurement	Action
				🗑
TOTAL	$0.00			

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34. Fill in all applicable fields in *Section 3: Subrecipient*

    *If additional rows are needed, click the **Add** button within each application section. If additional rows need to be removed, click the **Trash** icon to the right of the row.*

    *Click the **Save** button when finished entering information in this section*

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3 **III. Subrecipient** - Carries out a portion of the federal program and is required to meet all programmatic compliance requirements.

A Subrecipient does not require procurement if it aligns with the criteria in WSD 18-06. Upon review, the State may determine that a subcontractor is a contractor. If this occurs, procurement would be required.

[Add] [Save]

Program Service Activities	Cost	Agency Name	Action
			🗑
TOTAL	$0.00		

35. To move to the next area of the application, click **Budge Summary** in the Navigation Bar	Cover Page Narrative Deliverables Expend Plan Budget Narrative **Supplemental Budget** Budget Summary Work Plan Files
36. At the top of the Budget Summary tab are directions on how to fill out the sections of this page. There is also a link to the Workforce Accelerator Fund Webpage, which provides comprehensive application instructions	Cover Page Narrative Deliverables Expend Plan Budget Narrative **Budget Summary** More In the spaces provided below, please list out all line item allocations of the proposed budget. Costs are divided into two categories: Grant Funds (WIOA 15%) and Leveraged Funds (Match). Grant Funds (WIOA 15%) refers to the amount of funding you are requesting from the CWDB. Leveraged Funds (Match) refers to leveraged funds as match contribution. Instructions below to assist with each section: For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage. Save

| 37. Fill in all budget information into the Budget Summary tab. Each category should match the numbers from the Budget Narrative area |

①

Line Item	Budget Line Item	Grand Funds(WIOA 15%)	Leveraged Funding (Match)	Total Project Budget	Source of Leveraged Funds	Type of Leveraged Fund
A	Staff Salaries			$0.00		Select ▾
B	Number of full-time equivalents: **0**					
C	Staff Benefit Cost			$0.00		Select ▾
D	Staff Benefit Rate (Percent):**0**					
E	Staff Travel			$0.00		Select ▾
F	Operating Expenses			$0.00		Select ▾

38. Once all applicable fields have been entered, the Total Funding and Total Award will have auto calculated from the above fields. Both fields <u>must</u> match each other and the total amount requested					

| Q | TOTAL FUNDI... | $100,000.00 | $0.00 | $100,000.00 | |

** See Exhibit G for definitions for Subrecipients vs Contractors
EDD Directive - Subrecipient vs Contractor Distinctions

Total Award	$100,000.00
***Administrative Costs	$10,000.00
Program Costs	$90,000.00

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39. At the bottom of the Budget Summary page is a table for Indirect Cost Rate. Fill in the fields if applicable

Note: above these fields are three blue links which will open regulations and directives pertaining to this section for additional information in a new tab

2

*Indirect Cost Rate must be negotiated and approved by Cognizant Agency, per Appendices III or IV to Uniform Guidance 2CFRPart200.

EDD Directive - Indirect Cost Rates   2CFRPart200 Appendix III   2CFRPart200 Appendix IV

1	Indirect Cost Rate (Percent):	
2	Name of cognizant Agency:	

***A maximum of 10% of the total project budget will be allowed for administrative costs.
The definition of administrative costs is provided in Appendix A of the RFA.

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40. When you have finished entering information Budget Summary area, navigate to the top of the page and click **Save**

*Note: Be sure to click **Save** after entering in information. If you exit the system, or if it times out due to being idle, you will lose the information entered in the fields unless **Save** has been clicked*

Cover Page   Narrative   Deliverables   Expend Plan   Budget Narrative   **Budget Summary**   More

In the spaces provided below, please list out all line item allocations of the proposed budget. Costs are divided into two categories: Grant Funds (WIOA 15%) and Leveraged Funds (Match). Grant Funds (WIOA 15%) refers to the amount of funding you are requesting from the CWDB. Leveraged Funds (Match) refers to leveraged funds as match contribution. Instructions below to assist with each section:
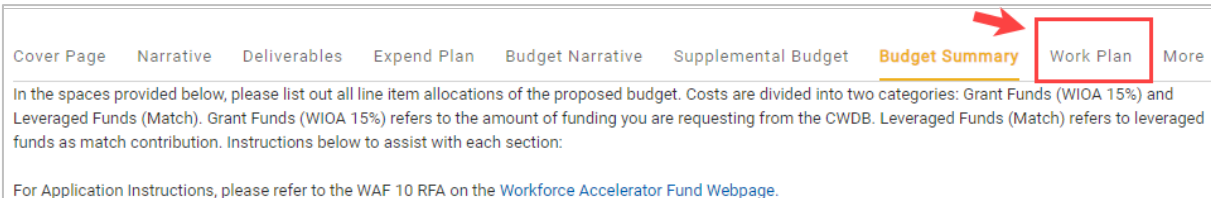
For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.

Save

41. To move to the next area of the application, click **Work Plan** in the Navigation Bar
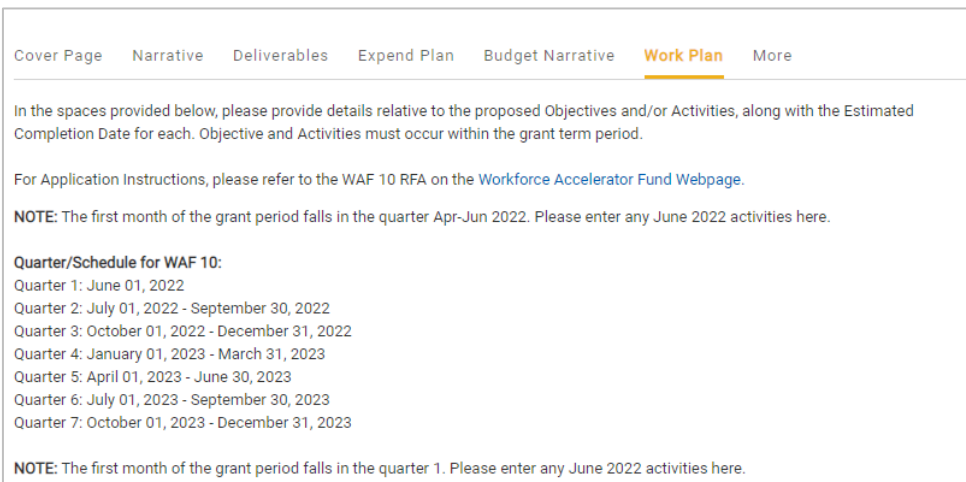
| Cover Page | Narrative | Deliverables | Expend Plan | Budget Narrative | Supplemental Budget | **Budget Summary** | Work Plan | More |

In the spaces provided below, please list out all line item allocations of the proposed budget. Costs are divided into two categories: Grant Funds (WIOA 15%) and Leveraged Funds (Match). Grant Funds (WIOA 15%) refers to the amount of funding you are requesting from the CWDB. Leveraged Funds (Match) refers to leveraged funds as match contribution. Instructions below to assist with each section:

For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.

42. At the top of the Work Plan tab are directions on how to fill out the sections of this page. There is also a link to the Workforce Accelerator Fund Webpage, which provides comprehensive application instructions

| Cover Page | Narrative | Deliverables | Expend Plan | Budget Narrative | **Work Plan** | More |

In the spaces provided below, please provide details relative to the proposed Objectives and/or Activities, along with the Estimated Completion Date for each. Objective and Activities must occur within the grant term period.

For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.
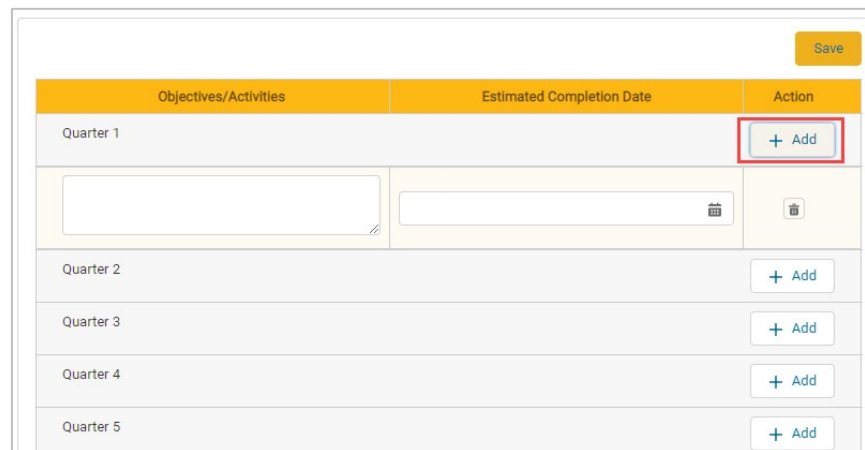
NOTE: The first month of the grant period falls in the quarter Apr-Jun 2022. Please enter any June 2022 activities here.

Quarter/Schedule for WAF 10:
Quarter 1: June 01, 2022
Quarter 2: July 01, 2022 - September 30, 2022
Quarter 3: October 01, 2022 - December 31, 2022
Quarter 4: January 01, 2023 - March 31, 2023
Quarter 5: April 01, 2023 - June 30, 2023
Quarter 6: July 01, 2023 - September 30, 2023
Quarter 7: October 01, 2023 - December 31, 2023

NOTE: The first month of the grant period falls in the quarter 1. Please enter any June 2022 activities here.

43. Add in line items for each Quarter. There are 7 Quarters to enter information for. To Add in a line item, click the + Add button. Enter in the description and the Estimated Completion Date. The date must fall within that designated quarter

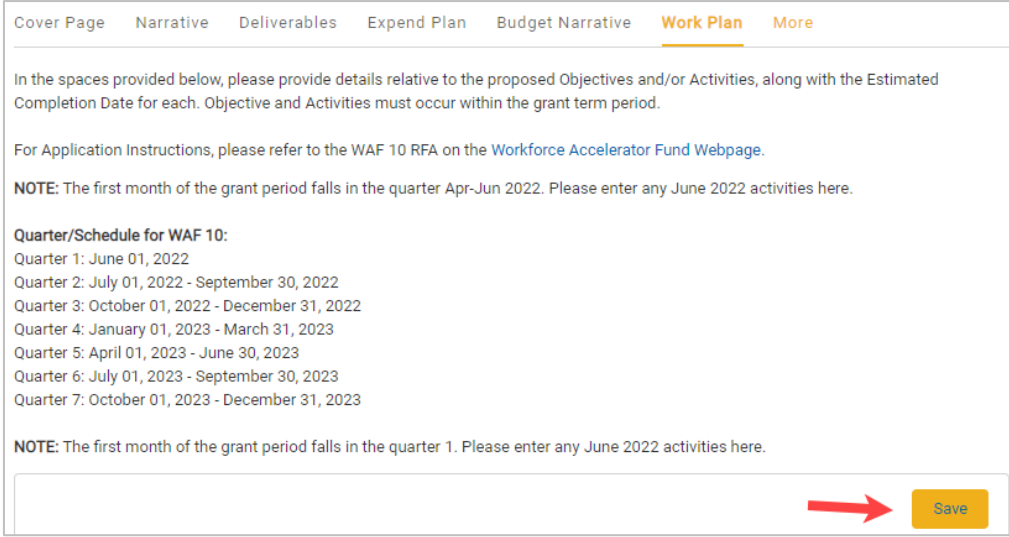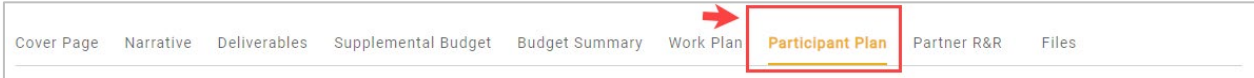*Note: You can either type in the date or use the calendar pop up that appears*
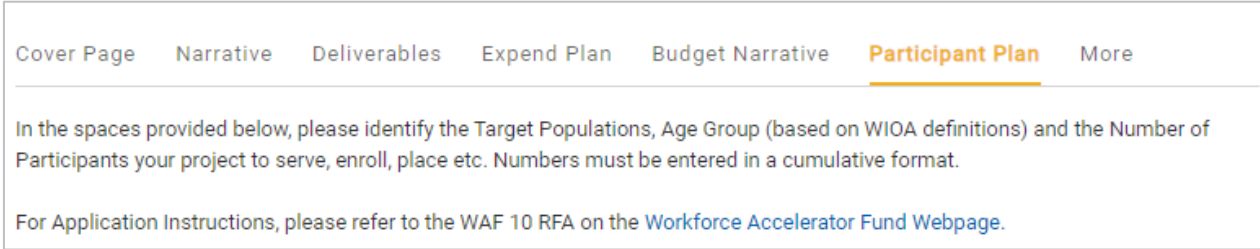
Objectives/Activities	Estimated Completion Date	Action
Quarter 1		+ Add
		🗑
Quarter 2		+ Add
Quarter 3		+ Add
Quarter 4		+ Add
Quarter 5		+ Add

44. When you have finished entering information in the Work Plan area, navigate to the top of the page and click **Save**

    *Note: Be sure to click **Save** after entering in information. If you exit the system, or if it times out due to being idle, you will lose the information entered in the fields unless **Save** has been clicked*

| Cover Page | Narrative | Deliverables | Expend Plan | Budget Narrative | **Work Plan** | More |

In the spaces provided below, please provide details relative to the proposed Objectives and/or Activities, along with the Estimated Completion Date for each. Objective and Activities must occur within the grant term period.

For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.

NOTE: The first month of the grant period falls in the quarter Apr-Jun 2022. Please enter any June 2022 activities here.

Quarter/Schedule for WAF 10:
Quarter 1: June 01, 2022
Quarter 2: July 01, 2022 - September 30, 2022
Quarter 3: October 01, 2022 - December 31, 2022
Quarter 4: January 01, 2023 - March 31, 2023
Quarter 5: April 01, 2023 - June 30, 2023
Quarter 6: July 01, 2023 - September 30, 2023
Quarter 7: October 01, 2023 - December 31, 2023

NOTE: The first month of the grant period falls in the quarter 1. Please enter any June 2022 activities here.

[Save]

45. To move to the next area of the application, click ***Participant Plan*** in the Navigation Bar

    Note: This tab only appears if the question "Is Project Serving Participants" on the cover page was "Yes"

| Cover Page | Narrative | Deliverables | Supplemental Budget | Budget Summary | Work Plan | **Participant Plan** | Partner R&R | Files |

46. At the top of the ***Participant Plan Tab*** are directions on how to fill out the sections of this page. There is also a link to the Workforce Accelerator Fund Webpage, which provides comprehensive application instructions

| Cover Page | Narrative | Deliverables | Expend Plan | Budget Narrative | **Participant Plan** | More |

In the spaces provided below, please identify the Target Populations, Age Group (based on WIOA definitions) and the Number of Participants your project to serve, enroll, place etc. Numbers must be entered in a cumulative format.

For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.

47. Fill in all applicable fields in *Section I: Target Populations*. There are two questions in this section. To answer, select the applicable values in the left column, and click the arrow to move them over to the right column

Section I. Target Populations

1. Identify target population(s) project will serve: ⓘ

Available / value

- English Language Learners
- Homeless and Housing Insecure
- Immigrants
- Justice-involved Individuals
- People with Disabilities
- Veterans
- Out of School Youth

Save

2. Based on WIOA definitions, which will your project serve (select all that apply): ⓘ

Available / value

- Adult – 18 Years or older
- Youth – Will be identified as "OSY Youth" under your …

48. Fill in all applicable fields in *Section II: Participant Plan*. There is a table to fill in the # of participants per quarter in this section. Enter in data in any applicable fields

Section II. Participant Plan

1. Identify your project goals, performance measures, and outcomes to be accomplished with grant funding and by the end of the grant term:

Participant Outcome	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Quarter 5	Quarter 6	Quarter 7	Total
Enrolled in Program (CalJOBS)								
No of Participants at Start of Quarter	0	0	0	0	0	0	0	0
No of New Participants Joined This Quarter ⓘ	0	0	0	0	0	0	0	0
No of Participants Exited This Quarter ⓘ	0	0	0	0	0	0	0	0
No of Participants at End of Quarter								0
Training								
Enrolled in Training	0	0	0	0	0	0	0	0

49. Continue answering the fields in *Section II: Participant Plan*. Beneath the table is an additional question with four sub-questions. Answer as needed	**2** 2. Provide details on desired placement outcomes: a. Post-secondary Education Salesforce Sans 12 B *I* U S b. State-Approved Apprenticeship Salesforce Sans 12 B *I* U S c. Career Advancement / Promotion for Incumbent Workers Salesforce Sans 12 B *I* U S d. Employment (New Employees) Salesforce Sans 12 B *I* U S
50. When you have finished entering information in the **Participant Plan Tab**, navigate to the top of the page and click the **Save** button *Note: Be sure to click **Save** after entering in information. If you exit the system, or if it times out due to being idle, you will lose the information entered in the fields unless **Save** has been clicked*	Cover Page Narrative Deliverables Expend Plan Budget Narrative Supplemental Budget **Participant Plan** More In the spaces provided below, please identify the Target Populations, Age Group (based on WIOA definitions) and the Number of Participants your project to serve, enroll, place etc. Numbers must be entered in a cumulative format. For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage. **Section I. Target Populations** [Save] 1.Identify target population(s) project will serve: ⓘ Available value

51. To move to the next area of the application, click *Partner R&R* in the Navigation Bar	Cover Page Narrative Deliverables Budget Summary Work Plan **Participant Plan** Partner R&R Files
52. At the top of the *Partner R&R Tab* are directions on how to fill out the sections of this page. There is also a link to the Workforce Accelerator Fund Webpage, which provides comprehensive application instructions	Cover Page Narrative Deliverables Expend Plan Budget Narrative Supplemental Budget **Partner R&R** More In the space provided below, please provide details relative to the proposed Project Partners, including their roles, responsibilities and any leveraged/match funding if applicable. Please do not list the CWDB as we are the funders/lead grant administration. For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.
53. Add in line items for each **List Partner** (as needed). There are 12 Possible List Partners to enter information To Add in a line item, click the **+ Add** button. Enter in the **List Partner Name**, **Roles & Responsibilities**, **Leveraged Funding Amount (if applicable)**, and the **Leveraged Funding Type** *Note: If additional rows are needed, click the **Add** button within each application section. If additional rows need to be removed, click the **Trash** icon to the right of the row*	See table below

List Partners	Roles and Responsibilities	Leveraged Funding Amount (if applicable)	Leveraged Funding Type (Cash/In-Kind)	Action
Local Workforce Development Boards				+ Add
		$0.00	Select	🗑
State Agency Partners				+ Add
Employers/Industry Champions				+ Add
Labor				+ Add
Education – Universities, Community Colleges				+ Add
Education – K-12				+ Add
Other Educational Institutions (e.g., ROP, CTE, etc.)				+ Add
Additional County Office(s)				+ Add
Training Providers (Not already mentioned)				+ Add
Economic Development Agencies				+ Add
Community-Based Organizations /Faith-Based Org./Other Non-Profits				+ Add
Others (Please List)				+ Add
	TOTAL	$0.00		

Note: *Leverage Funds listed in this section should also be included on the Budget Summary, for all entities contributing funds (leverage or match).

54. When you have finished entering information in the **Partner R&R Tab**, navigate to the top of the page and click the **Save** button

    *Note: Be sure to click **Save** after entering in information. If you exit the system, or if it times out due to being idle, you will lose the information entered in the fields unless **Save** has been clicked*

Cover Page	Narrative	Deliverables	Expend Plan	Budget Narrative	Supplemental Budget	**Partner R&R**	More

    In the space provided below, please provide details relative to the proposed Project Partners, including their roles, responsibilities and any leveraged/match funding if applicable. Please do not list the CWDB as we are the funders/lead grant administration.

    For Application Instructions, please refer to the WAF 10 RFA on the Workforce Accelerator Fund Webpage.

    Save

List Partners	Roles and Responsibilities	Leveraged Funding Amount (if applicable)	Leveraged Funding Type (Cash/In-Kind)	Action

55. To move to the next area of the application, click **Files** in the Navigation Bar

    Cover Page   Narrative   Deliverables   Expend Plan   Budget Narrative   Supplemental Budget   Budget Summary   **Work Plan**   Files

56. If you have a file to add, select the add files button at the top right of the page

    Note: There are no required documents for this application

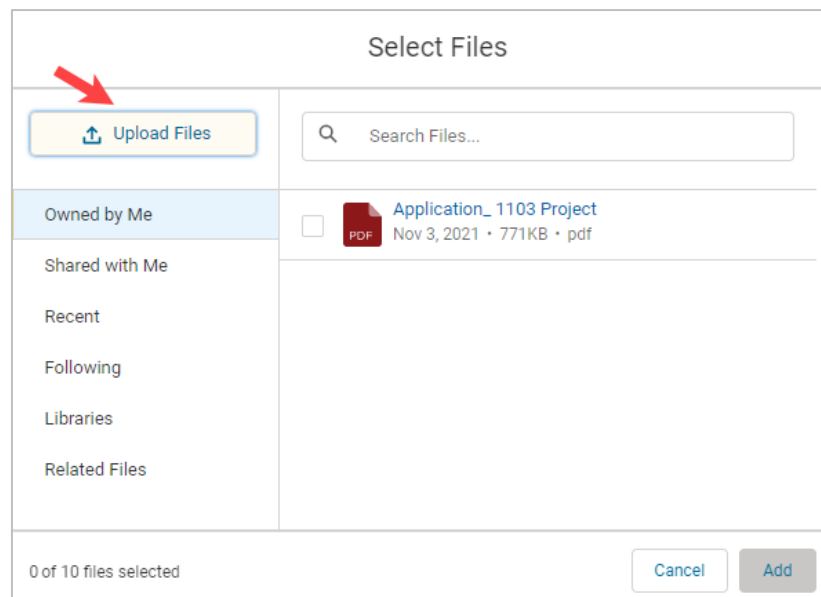   Cover Page   Narrative   Deliverables   Expend Plan   Budget Narrative   **Files**   More

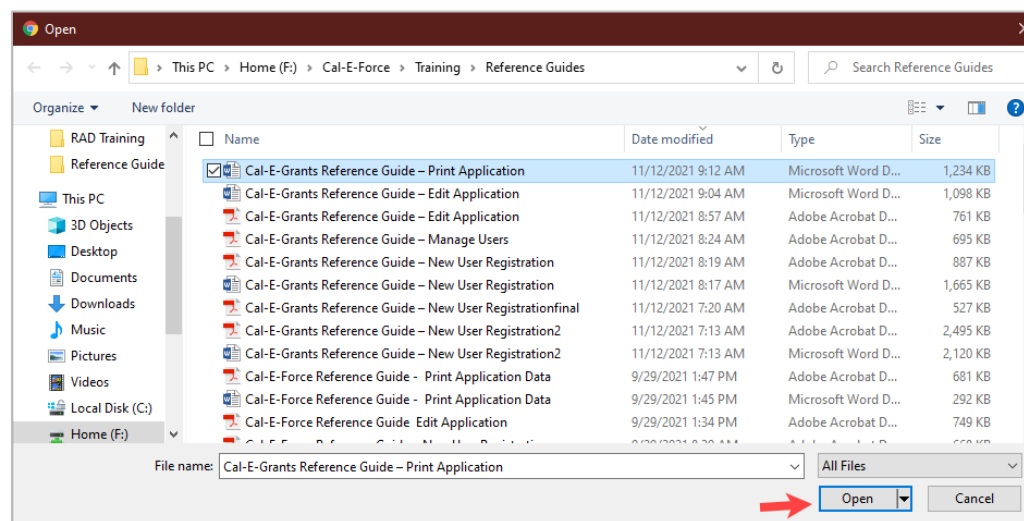   Files (0)   Add Files

Title	Owner	Last Modified	Size

| 57. Select the upload files button to select the file from your computer | |
| 58. Select the file from the location on your computer and click open | |
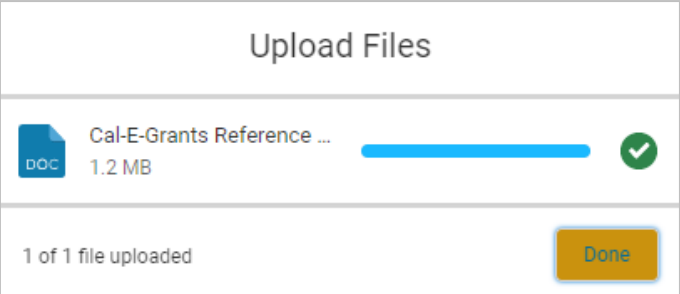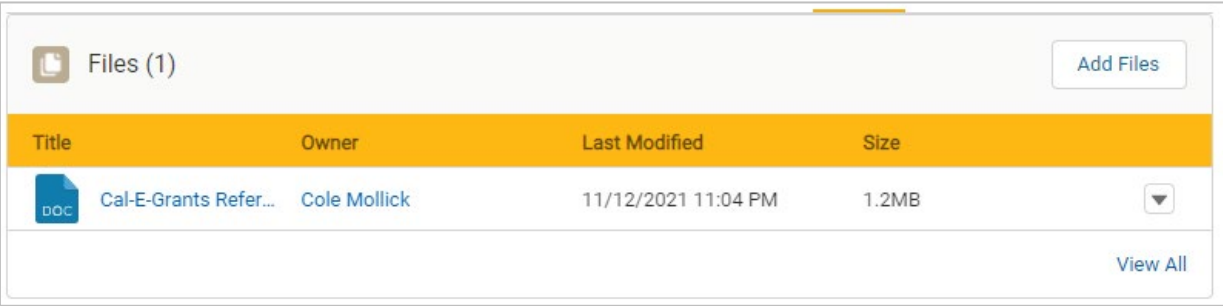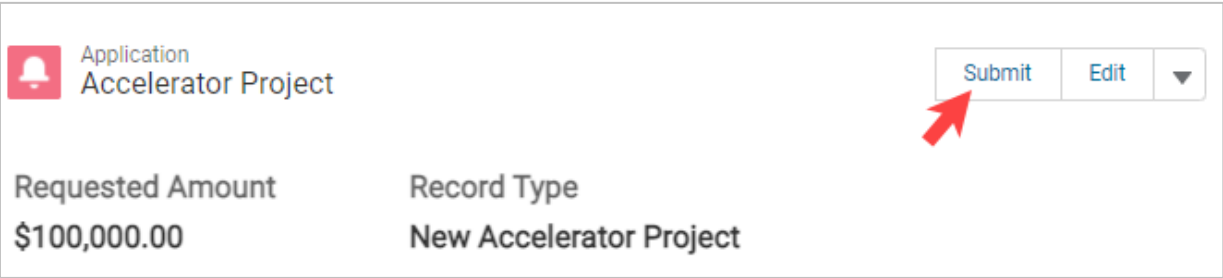
59. The document has finished uploading when a green checkmark appears. Click **Done** to exit	**Upload Files** DOC Cal-E-Grants Reference ... 1.2 MB ✓ 1 of 1 file uploaded Done
60. The document will now appear in the list view. Repeat the steps to add additional files	**Files (1)** Add Files Title Owner Last Modified Size DOC Cal-E-Grants Refer... Cole Mollick 11/12/2021 11:04 PM 1.2MB ▼ View All
61. You are ready to submit. Verify all information has been completed. When ready to officially submit, click the **Submit** button at the top of the page *Note: Once you have formally submitted your application, you can no longer edit it*	Application Accelerator Project Submit Edit ▼ Requested Amount Record Type $100,000.00 New Accelerator Project

62. If there is any missing information when you attempt to submit. You will receive an error message with the fields requiring information input	**Error Messages** **Budget Summary** 1. Please enter values of Program Costs 2. Please enter values of Total Project Budget
63. If all required information has been inputted, you will receive confirmation that your application was submitted successfully and the status bar will update to "Application Submitted"	Your application submitted successfully! Application Project Name Test Submit Edit Requested Amount Record Type $100,000.00 New Accelerator Project ✓ — Application Submitted — Application Under Review — Request for Additional Inf... — Award In Progress — Award Converted to Grant