

Application Preview

Cover Page

1. Applicant Information

- a. Applicant Name
- b. Organizational Unit
- c. Address
- d. Address 2
- e. City State Zip
- f. Federal ID Number Reference No. Unique Entity Id.
- g. Agency's fiscal year (beginning month and day)
- h. Agency Type
 - Community College / University
 - Local Government
 - For-Profit
 - Regional Training Center
 - School District
 - Training Trust
 - Employer
 - Non-Profit
 - Registered Apprenticeship Sponsor
 - State Agency
 - Tribal Government
 - University

2. Project Information

- a. Project Name
- b. Is implementing agency same as Applicant Yes No
- c. Implementing Agency Name
Address

City State Zip
Phone Fax
- d. Project Start Date End Date
- e. Amount of Funds Requested Project Cost
- f. **In-School Participants**
 - New Participants
 - Participants Carried Forward

Out-of-School Participants

 - New Participants
 - Participants Carried Forward
- g. **Total Number of Participants Served**
- h. Total Cost Per Participant. (Cost will be auto-filled once the budget is completed.)
- i. **Select the economic region(s) as shown in the RGA, where the individuals will be trained.**
 - Southcentral Region (Anchorage/Matsu)
 - Interior Region
 - Southeast Region
 - Gulf Coast Region
 - Northern Region
 - Southwest Region

3. Contact Information

a. Contact Type

Name

Title

Mailing Address

City

State

Zip Code

Telephone

Fax

E-mail Address

SAMPLE

Project Description

1. Project Description

Provide a project overview and describe your work plan to achieve your project objectives. Please identify resources and partners and their role in the project. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

2. Organizational Capacity

Describe your organization's capacity to successfully deliver youth program services. Include information on available infrastructure, resources, and personnel as well as information on prior or current youth projects as applicable. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

3. Target Demographic

WIOA Youth serves both in-school and out-of-school youth. Please identify which group(s) your project will serve. Include referral options for participants not eligible for WIOA Youth service. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

4. Outreach and Recruitment

Describe the methods to be used for outreach and recruitment; the economic regions, as shown in the RGA, where the youth will be recruited & trained; and the communities within each region where these activities will occur. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

5. Eligibility and Assessment

Describe your project's methods to determine eligibility based on WIOA Youth parameters, and the assessment resources available to identify youth training and support service needs. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

6. Individual Service Strategies

Describe your project's ability to utilize assessment information to develop outcome-based training and career plans, then to deliver services based on the developed plan. Identify project personnel responsible for this function. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

7. Service Delivery Model and Basic Elements

For each basic element listed below, describe how the element will be provided and whether it will be provided in-house or through a partner agency. If through a partner agency, list the agency and type of agreement (e.g., MOU, letter of commitment, etc.).

- a. Tutoring, study skills training, and instruction leading to completion of secondary school, including for dropouts. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- b. Alternative secondary school service. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- c. Summer employment opportunities that are directly linked to academic and occupational learning. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- d. Paid and unpaid work experiences, including internships and job shadowing. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- e. Occupational skill training. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- f. Leadership development opportunities, which may include community service and peer-centered activities. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- g. Supportive services. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- h. Adult mentoring (required for a total of not less than 12 months). (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- i. Follow-up services for not less than 12 months after the completion of participation. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- j. Comprehensive guidance and counseling, which may include addressing drug and alcohol issues. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- k. Financial literacy education. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- l. Entrepreneurial skills training. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- m. Career awareness, career counseling, and career exploration. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- n. Activities that help youth prepare for and transition to post-secondary education and training. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- o. Suicide prevention activities. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

8. Work-Based Learning

WIOA mandates that 20% of the total budget be used for work experience. Describe your ability to develop work experience opportunities for participants, and identify any current employer partners for work-based learning activities. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

9. Training and Credentials

In the table below, identify the credentials participants can earn through your program:

Training	Duration of Training	Training Costs	Certification/Credential	Training Provider
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10. Program Performance

Youth program performance is measured using the factors listed below. Explain how your program will support positive outcomes for each measure.

- a. Percentage of participants who are in education, training activities, or unsubsidized employment during the second quarter after exit (Proposed State target: 54%). (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- b. Percentage of participants who are in education, training activities, or unsubsidized employment during the fourth quarter after exit (Proposed State target: 50%). (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- c. Median earnings of participants in unsubsidized employment during the second quarter after exit (Target TBD based on prior years baseline). (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- d. Percentage of participants who obtain a recognized postsecondary credential or secondary school diploma or equivalent during participation or within one year after program exit (Proposed State target: 50%). (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

- e. Percentage of participants who, during a program year, are in education that leads to a recognized postsecondary credential or employment, and who are achieving measurable gains toward those goals (Target TBD based on prior years baseline). (Character Limit: 1024)

Continue description here if necessary. (Character Limit: 1024)

SAMPLE

Project Budget

	Line Item	Qty	Rate	UOM	Grand Total	Subaward Amount
1.	Personnel Service (Non Work Experience)					
<p>Instructions : Identify wages or salaries paid to employees for project activities in the personnel services category. Contractors or professional contracts hired by the subrecipient to perform activities of the grant but are not considered a regular employee of the applicant must be identified in the "Contractual" category.</p> <p>Wages and salary are defined as a regular fixed amount of payment an employee earns for performing work on behalf of the employer.</p> <p>Fringe Benefits is defined as the cost of benefits paid to the personnel on the grant, including the cost of employer's share of FICA, health insurance, workers' compensation, and vacation.</p> <p>*Participant work experience or stipends should be placed under the Work Experience category.</p> <p>Personal Service amounts should be based upon the amount normally paid to the individual and the portion of the time that will be spent working on the project. For salaried individuals, the calculation should be the monthly salary amount times the percent of time in a month the individual will work on the project times the number of months the project will last. For hourly wage individuals, the calculation should be the hourly wage amount times the number of hours worked on the project in a month times the number of months of the project. Fringe benefit amounts are usually calculated as a percentage of the amount of salary or wage amount.</p>						
1. Administrative Assistant						
2. Accountant						
3. Career Guide						
4. Case Manager						
5. Counselor						
6. Data Entry Clerk						
7. Director						
8. Executive Director						

<p>*STAFF TIME MAY NOT EXCEED 40% OF TOTAL WORK EXPERIENCE BUDGET LINE</p> <ul style="list-style-type: none"> • participant work experience orientation sessions; • employer work experience orientation sessions; • classroom training or the required academic education component directly related to the work experience; • incentive payments directly tied to the completion of work experience; and • employability skills or job readiness training to prepare youth for a work experience. 					
1. Job Skills Training					
2. Participant Wage/Stipend/Incentive					
3. Staff Time - Work Experience					

8. **Administration**

Instructions : For the purpose of AWIB budgets, indirect and administration are used interchangeably. Indirect costs are incurred for common or joint objectives that benefit more than one project. They may originate in your own unit or in units of your organization that supply goods, services, or facilities to the grant. Most often, the term “administrative costs” is used to indicate costs that are incurred to support the overall operation of the organization. Under no circumstances may an organization charge for both direct administrative expenses and an administrative rate.

The applicant may only charge administration if the organization is in receipt of an approved Federal Indirect Cost Rate (IDC), provisional rate, predetermined rate or a De Minimis Rate Certificate.

Per 2 CFR 200.414 Indirect (F & A) costs and Appendix IV to Part 200 – Indirect (F&A) Costs Identification and Assignment, Rate Determination of Non Profit Organizations, 2. Negotiation and Approval of Rates (a)(b)(c)(d), if the applicant has not previously established an Indirect Cost Rate, predetermined rate, or De Minimis Rate, they must submit its initial indirect cost proposal immediately to the agency that provides the largest source of federal funds following the effective date of the award but no later than three months following the start date.

Exclusions to the De Minimis rate include equipment, capital expenditures, patient care, rental costs, tuition and participant support costs, portion of sub-awards in excess of \$25,000 and other items that may be excluded by the Federal cognizant agency. .

Applicants cannot exceed the limitations that may be specified in the application instructions.

	1. De Minimis Rate Certification []								
	2. Federally Approved Indirect []								
9.	Personnel Service (Non Work Experience)								
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2. Accountant									
3. Career Guide									
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5. Counselor									
6. Data Entry Clerk									
7. Director									
8. Executive Director									
9. Financial Officer									

internships and job shadowing, and on-the-job training.

Allowable expenditures that may be counted toward the work experience wages or stipends paid for participation in a work experience:

- staff time working to identify and develop a work experience opportunity, including staff time spent working with employers to identify and develop the work experience;
- staff time working with employers to ensure a successful work experience, including staff time spent managing the work experience;
- staff time spent evaluating the work experience;

*STAFF TIME MAY NOT EXCEED 40% OF TOTAL WORK EXPERIENCE BUDGET LINE

- participant work experience orientation sessions;
- employer work experience orientation sessions;
- classroom training or the required academic education component directly related to the work experience;
- incentive payments directly tied to the completion of work experience; and
- employability skills or job readiness training to prepare youth for a work experience.

1. Job Skills Training					
2. Participant Wage/Stipend/Incentive					
3. Staff Work Experience Time					

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	Category	Grand Total	Subaward Amount	Narrative
1.	Personnel Service (Non Work Experience)			
2.	Travel			
3.	Contractual			
4.	Supplies			
5.	Equipment			
6.	Participant Services			
7.	Work Experience			
8.	Administration			
9.	Personnel Service (Non Work Experience)			
10.	Travel			
11.	Contractual			
12.	Supplies			
13.	Equipment			
14.	Participant Services			
15.	Work Experience			
16.	Administration			
Totals				

SOURCE OF FUNDS

	Category	Grand Total	Subaward Amount	Narrative
1.	I/S BBWYLPI-P24000-7007-7112			
2.	I/S WE BBWYLPI-P24000-7010-7714-7112			

3.	I/S/T WE BBWYLPI-P24000-7020-7715-7112			
4.	I/S RSA BBWYLPI-P24000-7001-7112			
5.	I/S/T BBWYLPI-P24000-7006-7112			
6.	O/S BBWYLPO-P24000-7007-7112			
7.	O/S WE BBWYLPO-P24000-7010-7714-7112			
8.	O/S/T WE BBWYLPO-P24000-7020-7715-7112			
9.	O/S RSA BBWYLPO-P24000-7001-7112			
10.	O/S/T BBWYLPO-P24000-7006-7112			
11.	Other - Contribution			
Totals				

SAMPLE

Certifications

Certification

Any modification or failure to submit a signed certification with the application will result in the application being determined non-responsive and not subject to further consideration.

I have reviewed and understand the terms, conditions and requirements of the Program and Yes No agree to meet all federal and state requirements if selected for funding.

I certify that all information contained in this application and any attachments is true and Yes No accurate, and I understand that falsification of information may be cause for application disqualification or award revocation and repayment of any funds provided.

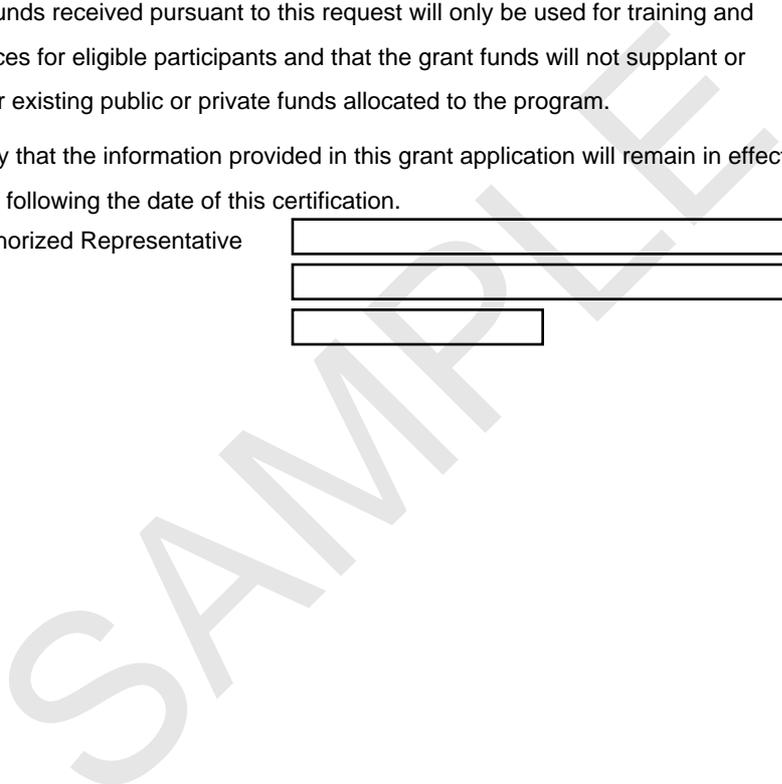
I certify that funds received pursuant to this request will only be used for training and Yes No support services for eligible participants and that the grant funds will not supplant or displace other existing public or private funds allocated to the program.

I further certify that the information provided in this grant application will remain in effect for Yes No up to 90 days following the date of this certification.

Name of Authorized Representative

Title

Date Signed



RSA

1 Attachments

Attach letters of commitments

Attachment Title	Attachment
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SAMPLE