INDIANA
WORKFORCE
DEVELOPMENT
AND ITS WorkOne CENTERS

**TO:** Indiana's Workforce Investment System

**FROM:** Jaclyn P. Dowd
Deputy Commissioner for Policy, Education and Training

**DATE:** June 25, 2012

**SUBJECT:** DWD Policy 2011-18 Guidance on the Process to Request a National Emergency Grant (NEG)

**Purpose**
To provide guidance to local workforce investment boards (LWIBs) and Regional Workforce Boards (RWBs) on the types of National Emergency Grants and the procedures for requesting a National Emergency Grant from the U.S. Department of Labor.

**Rescission**
DWD Policy 2010-01 dated September 7, 2010, and entitled, "Procedures for Requesting a Regular or Disaster National Emergency Grant (NEG) in the State of Indiana."

**Content**
A National Emergency Grant (NEG) is a discretionary grant authorized by the Secretary of the U.S. Department of Labor (DOL). These grants are designed to provide time-limited funding to assist states and workforce investment boards in responding to significant workforce events that exceed the availability of Workforce Investment Act (WIA) formula funds. Significant workforce events include mass layoffs, plant closings, and natural or man-made disasters.

In Training and Employment Guidance Letter (TEGL) 16-03, issued January 26, 2004 and Changes 1 through 5 to the TEGL, The USDOL Employment and Training Administration provides guidance to States on NEG programs. The NEG program is designed to provide the Secretary of Labor with a flexible programmatic tool with which to respond to emerging conditions. Each new NEG program will come with its own set of challenges and processes which will be addressed in the documentation for that program. This policy will address:

- Regular National Emergency Grants
- Disaster National Emergency Grants
- Trade Dual-Enrollment National Emergency Grants
- Health Coverage Tax Credit National Emergency Grants

## ***Regular National Emergency Grants***

A Regular NEG provides time-limited funding to temporarily expand the capacity of state and local workforce investment systems to rapidly respond to workforce dislocation events that are beyond the capacity of available resources.

Dislocation events that may qualify for a regular NEG include:

- Mass Layoff: Plant closure or mass layoff affecting 50 or more workers at a single site of employment;
- Community Impact: Layoffs at several companies in a single local community, including layoffs not meeting the single site criterion that in total have significantly increased the number of unemployed persons (usually interpreted to mean a one percent increase in unemployment ) in the community. This criterion applies at the local level and layoffs must have occurred within the six-months preceding the application. (While LWIBs are not prohibited from applying for layoffs in this category TEGL 16-02 states *"In order to ensure a consistent state-wide approach, we expect to focus our funding on applications from state applicants."*);
- Industry wide: Layoffs at multiple locations with employers who are in the same industry sector as evidenced by the 3-digit level of the North American Standard Industrial Classification Code, of which at least one company must have a layoff of 50 or more workers. (While LWIBs are not prohibited from applying for layoffs in this category TEGL 16-02 states *"In order to ensure a consistent state-wide approach, we expect to focus our funding on applications from state applicants."*); and
- Multiple Company: Layoffs at multiple locations (multiple companies) that occur within a 4-month period and in which each layoff affects 50 or more workers.

The initial requirement for all NEGs other than Disaster NEGs is that Indiana's Dislocated Worker (DW) formula program must have expended at least 70 percent of the previous program year's DW formula funds (including any carry-in) and be projected to expend not less than 70 percent in the current program year.

Applications should be submitted no later than 120 calendar days after the date the participants to be served under the NEG became eligible for services.

Eligibility begins when the workers receive a layoff notice or the company makes a public announcement that a layoff will occur. In those cases where a company has not made an announcement or provided notice to the workers, the date of the dislocation event is the date on which the workers become eligible for services.

Applications submitted more than 120 days after the date on which workers become eligible must provide a reasonable justification for the delay and specific information that demonstrates the workers continue to be interested in receiving reemployment services.

Eligible Applicants

Entities who may apply for a Regular NEG include:

- For Intra-state Projects:
  - Designated State WIA program grantee agency. (This is the Indiana Department of Workforce Development);
  - A Local Workforce Investment Board (LWIB) and its fiscal agent; and
  - A consortium of LWIBs whose workforce service areas adjoin.
- For Inter-state Projects:
  - A consortium of LWIBs whose workforce service areas adjoin; and
  - A consortium of States

In an application made by an association of adjoining LWIBs or States (a consortium agreement), the principals must designate in the application one of the participating entities to be the grant recipient and administrator. All the parties involved must develop a common set of service procedures, which should be attached to the application, so that all participants in the NEG will receive the same services in the same manner regardless of location.

Eligible Participants

In order to be served using Regular NEG funding an individual must be a WIA Dislocated Worker who was dislocated by the event(s) triggering the NEG Application.

In a Regular NEG the funds may be used to provide all WIA services except for those defined as Core services {WIA section 134(d) (2)}. This means that Regular NEG funds may be used to provide Intensive, Supportive, and Training services to any eligible participant.

Application Process

| Note: All NEG applications must be made using the US DOL Electronic Reporting System (E-System). Indiana has access to the E-System. Local Workforce Investment Boards (LWIBs) desiring to apply independently for a National Emergency Grant must obtain a password and a submission code for the E-System from the DOL National Office. |
|---|

In situations where the State is the grantee, the following elements are required from the requesting LWIB or RWB in order for the DWD to complete the application process:

1. A narrative description of no more than 4,000 characters describing the events that form the basis for the request and the impact those events have had on the community. This includes the number of verifiable individuals impacted, the number expected to be served, and the types of services to be performed;

2. A completed NEG Rapid Response Data Collection Summary Form (Attachment D). If no Rapid Response was conducted for included events, the LWB or RWB must add a narrative statement as to why it was not conducted. Rapid Response Survey Forms are required unless there are extenuating circumstances. The forms are to be held by the Project Operator through the DOL review process at grant completion.
3. A completed NEG Employer Data Form (Attachment C) for each company. For companies with multiple physical locations, LWIBs or RWBs must include a separate Employer Data Form for each of the employer's locations in addition to a separate Employer Data Form for each company layoff date;
4. A completed Project Operator Data Form (Attachment A). It must include the planned duration of the Project Operator's agreement with start and end dates, funding level, the number of participants to be served, a list specifying the cities and counties affected by the events, and a list of congressional districts affected by the event(s);
5. A completed NEG Project Planning Form (Attachment B); and

Grant Operations

In a Regular NEG, the Project Operator will identify eligible participants, enroll them in the NEG, and provide services using NEG funds as indicated by an assessment of the individual's needs.

Reports of expenditures and enrollments will be required quarterly and will be reported using (as a baseline) the Indiana Regular National Emergency Grant Project Operator Quarterly Report (Attachment E). NEGs require actual participation and expenditure data broken out in the categories listed on the quarterly report form. Because each NEG is unique, a quarterly report form for each specific NEG will be attached to the Statement of Work and may contain categories not on the basic quarterly report form. Data is to be reported cumulatively from the first day of the grant.

## ***Disaster National Emergency Grant***

The purpose of a Disaster NEG is to create temporary jobs by providing personnel for the cleanup and restoration of public infrastructure damaged in the disaster event and personnel to facilitate humanitarian assistance through public and private non-profit humanitarian agencies in the affected communities.

For a disaster event, man-made or natural in origin, to be eligible for a NEG the Federal Emergency Management Agency (FEMA) must have declared the area a disaster eligible for public assistance.

Each Disaster NEG is unique to the disaster on which it is based. The operational and reporting processes will be built on the framework detailed in this policy but will reflect the specific

challenges of the disaster event. The federal regulation restricts eligibility to apply for a Disaster NEG to State Agencies.

Eligible Participants

There are three categories of individuals that are eligible for service under Disaster NEG funding. In order of priority they are:

1. A person who is temporarily or permanently dislocated from his or her employment as a result of the disaster;
2. A long-term unemployed person (as defined by DWD); and
3. A WIA Dislocated Worker.

Application Process

Applications for a Disaster National Emergency Grant occur in two phases:

*Phase 1 – Emergency Application Form (Attachment F)*

The following elements are required from the LWIB and RWB, and the appropriate county/city offices within 8 days of the FEMA declaration. A separate application must be submitted by each participating LWIB/RWB to the DWD NEG Administrator. The application must include:

- The name and address of the requesting entity (the LWIB/RWB);
- The details of the FEMA declaration;
- A list of the counties and congressional districts affected by the disaster;
- The Project Operators designated name and their contact information;
- A projected number of participants;
- The estimated amount of federal funds being requested; and
- A description of the disaster event

Based on the submitted information, DWD will complete the initial application within 15 days of FEMA declaration, and submit it to DOL. If the application is approved, DOL will authorize an initial increment of the funding requested. That funding will be sub-granted to the participating regions to begin the necessary clean-up and restoration.

*Phase 2: Fully-Documented Plan*

The fully-documented plan must be submitted by DWD to DOL within 60 days of approval of the emergency request. Therefore, DWD must have the required information from the Project Operator's within 30 to 45 days of the approved emergency funding plan. The following elements, collected by the LWIB/RWB or its designee, are to be coordinated with local public agencies and are required in order for DWD to complete a fully documented plan:

1. A copy of the FEMA Disaster Declaration showing that the event is eligible for public disaster assistance for the area defined in the grant;

2. A narrative justification of not more than 4,000 words describing the event and the extent of damage;
3. A completed NEG Project Operator Data Form (Attachment A) which includes:
   a. The planned beginning and ending dates of the project,
   b. A list specifying the cities and counties affected by the event within the project operators area of responsibility, and
   c. A list of the congressional districts affected by the event
4. A completed Disaster NEG Project Planning Form (Attachment G) for each separate proposed project location. It includes:
   a. A specific project location with beginning and ending dates;
   b. The numbers of workers and supervisors required;
   c. The expected personnel cost for each project; and
   d. A list of requested materials with their costs. This materials request is limited to safety equipment and hand tools necessary to restore infrastructure to its pre-disaster condition. The purchase of equipment is not authorized.

Note: For National Emergency Grants, the purchase or lease of any tool, electronic device, or machine with a total cost more than $250.00 must be approved in writing by the NEG Administrator prior to purchase or lease.

The fully documented plan must be submitted within 60 days of approval of the emergency request; therefore, DWD must have the data required above within 45 calendar days of the approval of the emergency funding plan.

Grant Operations

In a Disaster NEG the funds will be sub-granted to the Project Operators based on the needs projected in the fully-documented plan. The Project Operators will hire participants, track hours worked and wages paid, and all supportive services. In addition, the Project Operator will track and document the purchase of all supplies and materials purchased using NEG funds in support of recovery operations.

The Project Operator will report quarterly to DWD using (as a base line) the Disaster National Emergency Grant Project Operator Quarterly Report form (Attachment H). This report includes both participation and expenditure data. Because NEGs are specific to a particular situation, DWD will modify Attachment H as required for the specific NEG and will attach the modified form to the Statement of Work for the NEG.

## ***Trade Dual-Enrollment National Emergency Grants***

A Trade Dual-Enrollment NEG is designed to provide Core, Intensive, and Supportive services ("wrap-around services") to TAA participants when DWD and LWIB or RWB has insufficient WIA Dislocated Worker formula funds to provide those services. DWD is expected to be the applicant for a Trade Dual-Enrollment NEG.

In order to apply for a Trade Dual-Enrollment NEG, DWD must:

- Show that it expended 70 percent of its WIA Dislocated Worker funds in the previous program year;
- Show that it is projected to expend not less than 70 percent of its WIA Dislocated Worker funds (including any carry-in from the previous program year) in the current program year; and
- Show that reserve funds are not available.

In those cases where DWD has exhausted its available TAA allotment for the current program year, a Trade Dual-Enrollment NEG application may include a request to expend TAA-NEG funds to provide training to TAA participants. If approved, the authority to use TAA-NEG funds for training would end upon receipt of DWD's next allotment of TAA funding. Therefore, the application must include a narrative providing a detailed process for shifting TAA-NEG funded training recipients to Trade funds as efficiently as possible when DWD receives its next allotment of Trade funding. Participants using TAA-NEG funds for training must be eligible for both the TAA program and WIA Dislocated Worker program. Receipt of Trade Readjustment Allowance (TRA) is not impacted by the use of TAA-NEG funds.

Eligible Layoff Event(s) must meet one of the following criteria:

- Plant closure and mass layoff of 50 or more workers at a single employment site where DOL has determined that the workers are TAA certified or a TAA petition has been filed.
- Layoffs at several companies in a single local community, including layoffs that do not meet the single site criteria, which have significantly increased the number of unemployed individuals in the local community. The layoffs must have occurred during the preceding 6 months, generally a 1% increase in local unemployment is considered significant. One of the companies involved must be TAA certified or pending a DOL decision as to TAA certification.
- Layoffs at multiple locations from companies in the same industry sector (as demonstrated by the 3-digit level of the North American Standard Industrial Classification Code). One of the companies must have a layoff of 50 or more workers. At least one of the involved companies must be TAA-certified or pending certification.
- Layoffs at multiple companies that occur within a 4-month period with each layoff impacting 50 or more workers. One or more of the companies must be TAA certified or pending certification.

Timelines for Submission

Applications are to be submitted within 120 calendar days of the date on which participants to be served become eligible (i.e., worker receipt of a layoff notice or company announcement of layoffs).

Applications submitted after the 120 day period must provide reasonable justification for the delay and specific information indicating continued interest in workforce services among the target population.

## ***Health Coverage Tax Credit (HCTC) National Emergency Grants***

The Health Coverage Tax Credit (HCTC) program is administered by the Internal Revenue Service. US DOL HCTC NEGs can provide special health coverage assistance through partial payment of health insurance premium costs under approved plans, supportive services and income assistance to targeted individuals defined in the Trade Adjustment Assistance Reform Act (TAA).

Applications for Health Coverage Tax Credit National Emergency Grants are restricted to DWD

## ***National Emergency Grant Management, Reporting, and Monitoring***

### The NEG Management Process

In situations where a LWIB/RWB is requesting DWD to apply for a NEG, the completed application documents are to be forwarded via e-mail to the DWD NEG Administrator. The DWD NEG team will review the application for completeness and either forward it to DWD's Leadership Team for a decision or return it to the requester for additional information. When a decision to continue with the application is made, the NEG team will schedule a meeting with the requesting LWIB to finalize the application.

### Required National Emergency Grant Reports

In all NEG programs where the State is the grantee, as discussed previously, quarterly reports are required from NEG Project Operators. The reports are due to DWD on the 10th calendar day of the month following the quarter being reported. The reports include both participation and financial expenditure details. All data is to be reported cumulatively from the first day of the grant. The quarterly report forms attached to this policy are the Regular NEG Project Operator Quarterly Report (Attachment E) and Disaster NEG Project Operator Quarterly Report (Attachment H). For all NEGs, DWD may modify the appropriate quarterly report form as necessary to meet the unique requirements of the particular NEG and include that modified form in the Statement of Work delivered with the grant award contract to the Project Operator.

DWD will review the Project Operator quarterly reports to ensure that performance goals are being met in a timely manner. If performance goals are not being met, DWD will work closely with the LWIB/RWB to identify the issues, and take appropriate action, which could include, but is not limited to, requiring corrective action by the Project Operator; modifying the grant to reflect actual performance; or other actions based on the status of the NEG.

### National Emergency Grant Monitoring

National Emergency Grants must be monitored by the Grantee. There will be a minimum of two (2) on-site reviews of the grant project within 90 days after the grant award between the DWD and the LWIB/RWB; a second approximately midpoint of the grant period or six (6) months

after the project begins enrolling participants, whichever comes first. Additional on-site reviews may be conducted based on the complexity of the project or any need identified during a regular monitoring visit.

The purpose of the reviews are to determine whether or not there is programmatic and fiscal compliance, that the project is operating within the parameters of the grant, and that performance goals are being met. The on-site visits will include a variety of parameters to determine that: 1) required services are being provided; 2) agreements are in place between sub-recipient and vendor/service providers; 3) the project is being implemented and managed timely and appropriately; and 4) the operation is fiscally-sound relative to its internal control monitoring and tracking processes.

If it is revealed that performance goals are not being met, DWD will determine the appropriate remedial actions. DWD may require the sub-recipient to develop a performance improvement plan, request a modification to the grant from the DOL, or actions based on the status of the NEG.

DWD may modify its monitoring process as it deems necessary.

**Effective Date**
Immediately

**End Date**
Upon rescission

**Ownership**
Indiana Department of Workforce Development
Policy Unit
10 North Senate Avenue, SE 302
Indianapolis, IN 46204

**Action**
LWIBs /RWBs shall ensure that the guidance contained within this policy is followed when working with DWD to request and implement US DOL National Emergency Grants in Indiana.

**Attachments**
Attachment A – Indiana NEG Project Operator Data Form
Attachment B – Indiana NEG Project Planning Form
Attachment C – Indiana NEG Employer Data Form
Attachment D - Indiana NEG Rapid Response Data Collection Summary
Attachment E – Regular NEG Project Operator Quarterly Report
Attachment F – Indiana Disaster Application Phase 1
Attachment G – Indiana Disaster NEG Project Planning Form
Attachment H – Disaster NEG Project Operator Quarterly Report

# Indiana National Emergency Grant
# Project Operator Data Form

(Attachment A)

| Please complete the following | |
|---|---|
| The name of the Project Operator? | |
| The Project Operator's street address? | |
| The Project Operator's contact person? | |
| The contact person's telephone number? | |
| The contact person's fax number? | |
| The contact person's e-mail address? | |

| | | |
|---|---|---|
| The planned duration of the Project Operator agreement? | Start date: (mm/dd/year) | End Date: (mm/dd/year) |
| The proposed funding level for this Project Operator? | | |
| How many individuals does this Project Operator intend to serve with this funding? | | |

| Please list the specific cities and counties affected by the events. | | |
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| Pleased list the congressional districts in the Project Operator's service area. |
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# Indiana National Emergency Grant

## Project Planning Form (Attachment B)

**All entries on this form are cumulative from the first quarter to the last quarter.**

| | Quarter 1 | Quarter 2 | Quarter 3 | Quarter 4 | Quarter 5 | Quarter 6 | Quarter 7 | Quarter 8 | Quarter 9 | Quarter 10 | Quarter 11 | Quarter 12 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Quarter ending date: | | | | | | | | | | | | |
| **Participants** | | | | | | | | | | | | |
| What is the planned enrollment each quarter? | | | | | | | | | | | | |
| How many will be enrolled in NEG funded training? | | | | | | | | | | | | |
| How many will be receiving NEG funded Supportive services? | | | | | | | | | | | | |
| How many will have exited the program? | | | | | | | | | | | | |
| How many will have exited the program with employment? | | | | | | | | | | | | |
| **Funding** | | | | | | | | | | | | |
| How much will be spent on Administration? | | | | | | | | | | | | |
| How much will be spent on Supportive Services? | | | | | | | | | | | | |
| How much will be spent on Intensive Services? | | | | | | | | | | | | |
| How much will be spent on NEG-funded training? | | | | | | | | | | | | |
| How much will be spent on "other"? | | | | | | | | | | | | |
| Total | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

**Please explain in detail any entry in the "other" funding category.**

# Indiana National Emergency Grant

## Employer Data Form (Attachment C)

| What is the name of the company? | What is the specific address of this facility? | What was the method of notification for this event? | What was the date of the notification? | What is the date of the layoff? | How many workers are being laid off? |
|---|---|---|---|---|---|
| | | | | | |

| | | |
|---|---|---|
| Was a Trade Adjustment Act (TAA) petition filed? | Yes | No |
| | | |
| If yes, what was the date of the filing? | (mm/dd/year) | |
| How many workers are covered by TAA? | | |

## Rapid Response Actions

| On what date was the employer contacted? | (mm/dd/year) |
|---|---|
| | |

| List the dates employees were contacted by the Rapid Response team. | How many workers were contacted on this date? | How many Rapid Response Surveys were collected on this date? | How many people indicated on the Rapid Response form their intent to seek training services? | Are the workers represented by a labor organization? | | | |
|---|---|---|---|---|---|---|---|
| | | | | Yes | | No | |
| | | | | If yes, indicate the name and address of the labor organization below. | | | |
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# Indiana National Emergency Grant
# Rapid Response Data Collection Summary Form
(Attachment D)

| Company Name | Facility Address | Layoff Date month/day/year | Number of Surveys Collected | Number of individuals requesting training |
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# Indiana Regular National Emergency Grant

# Project Operator Quarterly Report (Attachment E)

**Data reported on this form is cumulative quarter to quarter**

| Grant Number | IN- | | Month | | Year | |
|---|---|---|---|---|---|---|

## Participation Data

| | | |
|---|---|---|
| Total Grant Participants | | (Needs Related Payments (NRP) are not authorized in any NEG unless specifically addressed in the grant contract) |
| Enrolled in NEG Funded Training | | |
| Receiving NEG Funded Supportive Services | | |
| Receiving NEG Funded Needs Related Payments (NRP) | | |
| Participant Exits | | |
| Participants Employed at Exit | | |

## Expenditure Data

| | | |
|---|---|---|
| Core and Intensive Services | $ - | (Needs Related Payments (NRP) are not authorized in any NEG unless specifically addressed in the grant contract) |
| NEG Funded Training | $ - | |
| NEG Funded Supportive Services | $ - | |
| NEG Funded NRPs | $ - | |
| Total Program Cost | $ - | |
| Administration Excluding NRP processing | $ - | |
| Other | $ - | (If "other" is reported, you must provide a separate cost detail narrative) |
| Total Program Management & Oversight | $ - | |
| Total Project Operator Expenditure | $ - | |
| Total Amount Granted | $ - | |
| Percent Expended To-Date | #DIV/0! | |

**Any issues and obstacles encountered during this month?**

**Additional Layoff Dates**

| What is the name of the company? | What is the facility address? | What was the date of the layoff? | How many workers affected? |
|---|---|---|---|
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# Disaster NEG Application - Phase 1 (Emergency)
## (Attachment F)

| | |
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| Name of the Board Requesting Assistance | |
| Board Address | |
| Date of FEMA Declaration | |
| FEMA Declaration Number | |
| Counties Affected | |
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| Local Board Contact Person | |
| Name | |
| Telephone Number | |
| Cell Phone Number | |
| E-Mail Address | |
| Fax Number | |
| | |
| Estimated Number of Participants | |
| | |
| Total Federal Funding Requested | |
| | |
| Description of the Disaster Event | |

# Indiana Disaster National Emergency Grant

## Project Planning Form (Attachment G)

| Project Name | | |
|---|---|---|
| Project Location | City | Address |
| | | |

| Start Date | | | | | |
|---|---|---|---|---|---|
| End Date | | | | | |
| Number of work days | Number of workers required | Hourly Rate of Pay | Fringe Benefits | Total Hours | Extended Cost for Workers |
| | | | | 0 | $ - |
| | Number of Supervisors Required | Hourly Rate of Pay | Fringe Benefits | Total Hours | Extended Cost for Supervisors |
| | | | | 0 | $ - |

(Fields with 0's will auto-fill)

### Supplies and Materials Request

| Item Requested | Specifications | Number Required | | Cost Per item | | Extended Cost |
|---|---|---|---|---|---|---|
| | | | | | | $ - |
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| | | | | | Total Materials Cost | $ - |
| | | | | | Total Project Cost | $ - |

| | |
|---|---|
| Item Requested | Examples are shoes, boots, hats, shovels, equipment rental, etc. |
| Specifications | Examples are size, type, color, etc. |
| Fringe Benefits | The cost of fringe benefits per employee. |

# Disaster National Emergency Grant

## Project Operator Quarterly Report (Attachment H)

Data on this report is cumulative quarter to quarter

| Grant Number | IN- | Month of report: | | Year: | |
|---|---|---|---|---|---|

### Participation Data

| | | |
|---|---|---|
| Total Grant Participants | | |
| Participants receiving NEG Funded Supportive Services | | |
| Participants employed in temporary disaster relief assistance | | |
| Participant Exits | | |
| Participants employed at exit | | |

### Expenditure Data

| Project Operator Expenditures | | |
|---|---|---|
| Participant Wages | $ - | |
| Participant Fringe Benefit | $ - | Includes temporary agency (if employed) cost minus their profit |
| Core and Intensive Services | $ - | |
| NEG Funded Supportive Services | $ - | |
| Supply and Materials cost | $ - | |
| Total Program Cost | $ - | |
| Administration excluding Needs Related Payments processing | $ - | |
| Other | $ - | If "other" is reported, you must provide a separate cost detail narrative |
| Other | $ - | |
| Temporary agency profit (if temporary agency employed) | $ - | Temporary agency profit is the agency's markup percentage of the total charged to the grant. |
| Total Program Management & Oversight | $ - | |
| Total Project Operator Expenditures | $ - | |
| Total Amount Granted | $ - | |
| Percent Expended To-Date | #DIV/0! | |

Any issues and obstacles encountered during this month?