

Planned Expenditure of EDGE IV Funds by Provider

Provider: _____ Agency Code: _____

Program: _____ Project Number: _____

Agency's Projected EPE: \$_____ Contact Person: _____ Ph: _____

SECTION I - PLANNED GRANT EXPENDITURES BY FS-10 CATEGORIES

PLANNED EPE

FS-10 BUDGET CODES/ITEMS	60%	50%	60%
1 15 Professional Salaries			
2 16 Non-Professional Salaries			
3 40 Purchased Services			
4 45 Supplies & Materials			
5 46 Employee Travel			
6 80 Employee Benefits			
7 90 Indirect Costs	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	
8 49 BOCES Services			
9 30 Minor Remodeling			
10 20 Equipment			
11 TOTAL EXPENDITURES			

SECTION II - PLANNED GRANT EXPENDITURES AND ENROLLMENTS
BY ACTIVITY CATEGORIES

PLANNED EXPENDITURE

SECTION II	60%	50%	60%
12 Assessment/EP			
13 Education (Basic/HS/ISLE)			
14 Job Skills Training			
15 Job Readiness Training			
16 Job Development/Placement			
17 Work Experience CWEP			
18 Work Supplementation (TEAP)			
19 Case Management			

SECTION III

In WITNESS whereof, the parties hereby agree to work together to implement EDGE IV for the purpose of providing a unique adult learning and training experience leading to employment for ADC recipients in _____ County and have hereunto signed this agreement on the day and year opposite their respective signatures.

By: _____ Date: _____

Title: _____

_____ County Department of Social Services

By: _____ Date: _____

Title: _____

_____ (EDGE Provider Agency)