**YouthWorks 2021-2022—Year-Round Program**

**Application Cover Sheet**

City / Workforce Area:

Fiscal Administrator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program Contact Person:

Title:

Address 1:

Address 2:

City, State, Zip:

Telephone:

Fax:

E-mail:

**Program Narrative for 2021-2022 Year-Round**

1. **Recruitment, Target Population and Programmatic Approach**
	1. Complete the table below

|  |  |
| --- | --- |
| **Question** | **Response** |
| Will your program create its own professional development curriculum or use CommCorp’s Signal Success modules? |  |
| Regions are required to select, at least, two of three tiers, what tiers will your region provide? |  |
| * Tier One target enrollment number?
 |  |
| * Tier Two target enrollment number?
 |  |
| * Tier Three target enrollment number?
 |  |
| What % of the participants do you estimate will be youth in school? |  |
| Keeping in mind that participants can take part in multiple program components, what percent of youth do you estimate will participate in a… |
| * Service-learning project?
 |  |
| * Subsidized work placement?
 |  |
| * At least one of the Sector-Aligned Project Based Learning Intensives?
 |  |
| * At least one of the Micro-Career Pathway Courses?
 |  |
| If you have multiple vendors, please use the lines below to indicate how many youth each vendor will target serving |
| Vendor Organization Name | Sub-target for enrollment |
|  |  |
|  |  |

1. How will the **eligibility determination be conducted**? How will the flow of information be managed and documented such that youth eligibility will be determined in advance of the projected start date for participation?
2. Please briefly explain how wages, stipends and incentives will be utilized to prioritize opportunities for youth to earn and access financial resources as well as to promote program retention and completion.
3. **Staffing Plan, Case Management & Support Services**
	1. Complete the chart below to indicate the staffing plan. For programs with more than one vendor please group staff by vendor.

|  |  |  |
| --- | --- | --- |
| Staff Name and Title | Main Responsibilities for this grant | With exception of staff whose main duties are administrative and/or fiscal, all program staff funded under this grant are expected to support youth for at least 8 hours in one of the two virtual Sector-Aligned Project Based Learning Intensives. For each relevant staff, please place a check by the session they will support. |
| February 15-18  | April 18-21 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

* 1. Detail your **case management** approach and be sure to indicate what tools and strategies you will use to connect with participants remotely as well as which services will be in-person. For any in-person case management, please provide a back-up remote plan.
	2. Detail the **support services** that you plan to provide to participants.
	3. Please indicate how many **YouthWorks peer leaders** you intend to recruit and hire.

1. **Employer Outreach & Partnership Development**
2. If applicable, provide a sample list of employers who will provide subsidized work placements (remote, hybrid or in-person). If your program intends to provide in-person placements, briefly describe what contingencies you have planned to make sure youth can continue programming in the event that the in-person workplace is not viable for any period of time beyond an isolated day.
3. If applicable, provide a sample list partner organizations that you intend to work with to provide service-learning experiences. Indicate whether these service-learning projects will be remote, hybrid or in-person. For any in-person service-learning programs, briefly describe what contingencies you have planned in order to make sure youth can continue programming in the event that the in-person programming is not viable for any period of time beyond an isolated day.
4. Please provide list of name(s) of staff, community partners or employers who would be willing to devote one hour to participating in a Career Chat with participants. Include a direct email contact or the best person to reach out to facilitate an introduction to our outreach and engagement team.
5. **Program Operations and Administration**
6. Describe your process for **program monitoring** including workshop and worksite reviews, and fiscal monitoring of operators and subcontractors.
7. Describe basic **payroll procedures**.
8. Describe procedures and protocols in place for **ensuring data security and confidentiality** (hard copy files and electronic storage).
9. **Budget and Budget Narrative**
	1. Complete the project budget template and budget narrative.
10. **Program Timeline and TA Support**
11. Complete the table below indicating main goals and activities for each month of programming. If you have multiple vendors with varied approaches, please complete a table for each.

|  |  |  |
| --- | --- | --- |
| **Month of Programming** | **Main Activities and Goals** | **TA Support that would be helpful** |
| **September** |  |  |
| **October** |  |  |
| **November** |  |  |
| **December** |  |  |
| **January** |  |  |
| **February**  |  |  |
| **March**  |  |  |