

**Request for Proposals**

**for**

**Re-Entry Workforce Development Demonstration Program**

**FY’22 Appropriation**

**Issued by**

**Commonwealth Corporation**

**RESPONSES DUE:** October 1st, 2022 by 5pm

Upload electronic submission to the following link:

<https://commcorp.tfaforms.net/328902>

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**Re-Entry Workforce Development Demonstration Program**

**FY’22 APPROPRIATION**

**REQUEST FOR PROPOSALS**

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Section One: Grant Program Goals & Funding Availability

1. ***About the Initiative:*** The Re-Entry Workforce Development Demonstration Program is an initiative of Executive Office of Labor and Workforce Development Secretary Rosalin Acosta in support of Governor Baker’s effort to improve workforce outcomes among individuals returning to their communities after incarceration (i.e. returning citizens). This state-funded initiative is administered by Commonwealth Corporation on behalf of the Executive Office of Labor and Workforce Development. This grant program is funded through a General Appropriation Act in the Fiscal Year 2022 State Budget (7003-0150). Commonwealth Corporation is seeking applications from partnerships that have demonstrated experience, success, and current capacity in providing occupationally focused training and placement programs for returning citizens. The target population includes individuals who will be released within 60 days of a program start date or individuals who were released no earlier than 9 months prior to enrolling in a program or a combination or both. Applicants must demonstrate that the services they propose to provide will result in job placements, as well as 30 days of placement retention for participants by the end of the grant period.
2. ***Grant Initiative Goals:*** Commonwealth Corporation seeks qualified partnerships that, upon successful grant award, will work with Commonwealth Corporation for a duration of two months to design or re-design a sector-based training and placement program in order to better serve returning citizens, resulting in improved job access and financial stability for these individuals and their families while meeting employer demand for talent.

Following the two-month program design period, each partnership will, upon review and approval of their implementation plan, implement their program for approximately 6 months. Successful partnerships will build their capacity to provide case management supports alongside occupational and work readiness skills training, while prioritizing community engagement/outreach, individualized coaching, and intensive placement and post-placement support services. We anticipate programs will need to include virtual/remote and hybrid learning approaches.

1. ***Funding Availability:*** Approximately $2.25 million is available for this grant program. Commonwealth Corporation anticipates awarding a **maximum** amount of $160,000 each to **14** partnerships to engage in program design activities and subsequent program implementation. Of this amount, partnerships may request **up to $10,000 for initial program design activities.** At the conclusion of the two-month Program Design Phase, each of these partnerships will be required to submit an implementation plan for a training and placement program that will engage and prepare members of the proposed target population for jobs in the proposed target occupation. Upon review and approval of an implementation plan, these partnerships will implement their training and placement program no later than January 2022. **(Partnerships that feel they are ready to provide services immediately may submit an implementation plan utilizing a CommCorp provided template for approval at any time during the 2 month planning period, and begin implementation upon approval)** Partnerships will have approximately 6 months to deliver their program. Each partnership’s program design must include a set of services that are necessary for their proposed target population to enter and maintain employment for at least 30 days.
2. ***Program Structure and Design Expectations:*** This program is structured in two phases following RFP submission, including an approximately two-month Program Design Phase and an Implementation Phase of approximately 6 months:

Partnerships will have two months to complete program design activities. Commonwealth Corporation will be engaged with partnerships throughout the Program Design Phase. Partnership members must commit to participating in a program design and technical assistance structure. Partnerships should plan for at least two (virtual) meetings per month during the Program Design Phase (tentative dates are likely to fall in a two-month span during Fall 2021- Winter 2022):

* one meeting of all funded partnerships facilitated by Commonwealth Corporation in which the funded partnerships will focus on the identified program design topics for the month
* one meeting between each partnership and Commonwealth Corporation to focus on key challenges or areas that are unique to each partnership’s program design activities

At the start of the Program Design Phase, Commonwealth Corporation will provide a template to be completed for each deliverable stage of the program design. The deliverables will be due regularly based on an agreed upon schedule. The following draft schedule, subject to further revision, identifies the program elements that each partnership will be expected to design and deliver. We are particularly interested in supporting the design and refinement of innovative, culturally responsive models seeking to improve the learning and training strategies necessary to support successful outcomes among returning citizens. This includes program designs that demonstrate awareness and expertise with the specific demographic needs of those disproportionately impacted by incarceration; and those shown to have historically adverse post-incarceration outcomes and/or higher levels of recidivism. Please note that we will tailor these topics to address the most pressing needs at the time, which may shift:

|  |  |
| --- | --- |
| Date / Session | Illustrative Overview of Topics |
| Month #1  Individual Grantee Meeting #1 | ***Start-Up and Partnership Staffing and Priorities***   * Follow up from initial award announcement call * Contract & Deliverables Review * Partnership Start-Up   ***Partnership Engagement in Program Design and Supports***   * Reflecting upon the workforce problem that you are trying to solve * Identifying and solving for existing and emerging roadblocks * Understanding your target population through individualized and comprehensive assessment of education and work history, strengths, and barriers to employment, with a focus on barriers to language learning and remote training * Discuss preliminary plans for training design |
| Month #1  Learning Community Meeting #1 | ***Program Design Structure, Employer Engagement, and Resource Identification***   * Introductions to CommCorp Staff, Grantees, and other partners * Refinement of Employer Needs, including:   + Required skills for the target occupation   + Required credentials for the target occupation * Employer Engagement and Job Development * Perspectives on understanding how your target population intersects with your target occupation with a racial equity lens * Securing additional partners and/or deepening partnerships with community-based organizations and state agencies |
| Month #2  Individual Grantee Meeting #2 | ***Refining Recruitment, Assessment, Selection & Your Implementation Plan***   * Analyze case studies on outreach and selection process strategies * Revisit job placement and retention services |
| Month #2  Learning Community Meeting #2 | ***Building a Comprehensive Program Design with Individualized Supports***  Communicating and Level Setting Program Design Expectations   * Best Practices in Effective Program Design for Formerly Incarcerated Individuals * Developing Internal and External Communication Channels * Leveraging Partner Engagement for Enhanced Outcomes |
| Month #2  Final Implementation Plan Submitted | The final version of your Implementation Plan, consisting of program element responses, is due to your program manager by the end of the Program Design Phase. Please note that these dates are subject to change based on grant award announcement and contracting timelines. |
| Month #3 - Anticipated Start Date of Implementation Phase – *funding decisions subject to approval of your Implementation Plan by review committee led by Commonwealth Corporation team.* | |

1. ***Allowable Costs:***  Funds may be used for costs associated with delivering training and placement activities, and other services to prepare participants transitioning from a department of correction or house of corrections facility, for success in the targeted occupation(s), to optimize opportunities for participant learning and career development, and to achieve placement for participants. Funds may be used to support the following:

* Outreach, recruitment, assessment, and selection
* Support services needed to ensure participants’ success, such as transportation, childcare, textbooks, uniforms, and tools
* Training delivery, including classroom and formal on-the-job training
* Stipends for participating in training and work experience
* Staff time for partnership and program coordination, job development, case management and data entry
* Covid-19 related expenses to ensure safe and effective program delivery during the pandemic

**Section Two: Eligible Lead Applicants & Partners**

1. ***Eligible Applicants:*** The following organizations are eligible to apply as lead applicants on behalf of a partnership:
   1. Community-based organizations, particularly those with a track record of serving returning citizens
   2. Non-profit education, training, or other service providers
   3. MassHire Workforce Board
   4. MassHire Career Center,
   5. House of Corrections/Department of Correction facility

**(Please note – applicants that are not currently RWDDP grant recipients will be prioritized. However, existing RWDDP grantees may still apply, but will be required to participate in the 2-month program design technical assistance.)**

1. **Required Partnership Members:** Collectively, the members of the partnership must have demonstrated experience, success, and current capacity in providing occupationally focused training and placement programs for returning citizens reentering the community, including support services, education, training, and employment services. Partnership members are additionally expected to have demonstrated capacity to recruit and partner with racially & culturally diverse, community-reflective program participants and organizations to address the needs of the target population. Eligible lead applicants must also demonstrate that they have a relationship with an organization that has access to and will provide referrals to the program. The partners must sign a Memorandum of Agreement and provide a proposed client/cohort flow of services. (See Attachment 4 for details). These organizations must include partners from each of the following categories:
   1. **A minimum of two businesses with operations in Massachusetts and that employ Massachusetts residents in the target occupation(s).** Successful applicants will demonstrate that they have relationships with local businesses committed to providing placements for participants at the end of the grant period. Selected Business partners need to have demonstrated vacancies in their specific industry and be interested in using this program to fill said vacancies. These businesses must sign a Memorandum of Agreement. Applications that include specific hiring commitments from businesses will receive favorable consideration. If workers in the target occupation(s) at participating businesses are covered by a collective bargaining agreement, the union must also be a partner and sign the Memorandum of Agreement. Applicants are encouraged to identify additional partners that are critical to the sector and success of the target population and that will add value to the partnership.
   2. **A training provider with demonstrated expertise in providing occupational skills training integrated with work readiness/soft skills development and placing individuals in the target occupation**.
   3. **Community-based social service providers with a demonstrated expertise in engaging and supporting returning citizens in succeeding in transitioning to the community and to employment** **as evidenced by a proven track record of practicing culturally competent care in the community.**
   4. **The regional MassHire Workforce Board and/ or MassHire Career Center**
   5. **The House of Corrections or Department of Correction facility in the region**

There are many complex factors that would affect an individual’s ability to fully participate in an employment program/job placement pre- or post-release. Applicants must plan for these challenges by having robust conversations with all partners that address the following areas:

* Distribution of materials
* Clearly Identified job vacancies that would be accessible to program graduates/ completers
* Communication plan between business partners and case workers assigned to clients
* Scheduling around parole/probation check-ins
* Transportation plan if client population has significant barriers to accessing work placement sites

For HOC/DOC partners, applicants must address the following areas:

* Distribution of materials for use in training within corrections facilities
* Location of services and assessment of the population that will be able to access that location
* Technology needs
* Transportation plan if service population has access to offsite work/training opportunities
* Contact plan to obtain client contact information post-release and to coordinate post-release planning to ensure a seamless transition to community-based services and employment

Section Three: Training Program Design Requirements

1. ***Target Populations:*** Applicants funded under this grant will serve individuals who come from the following populations:

* Individuals in a Department of Correction facility who will be released within 60 days of a program start date or individuals who were released no earlier than 9 months prior to enrolling in a program or a combination or both.
* Individuals in a House of Corrections facility who will be released within 60 days of a program start date or individuals who were released no earlier than 9 months prior to enrolling in a program or a combination or both.

1. ***Target Occupations***: Applicants must provide training and placement services that prepare individuals to meet a regional business’ skill need and work readiness requirements for in demand occupation(s). Applicants may either propose to train individuals for an occupation in a single industry sector or for an occupation that exists in multiple industry sectors. In either case, applicants should identify a specific occupation to be targeted and design a training program that prepares individuals for that specific occupation- we recognize that there are occupations with identical required skills and credentials for entry. Applicants may propose to train individuals for multiple target occupations if the required skills and credentials are identical and can be attained through participation in the same training program. Using the document attached as Attachment 6, applications must identify a target region and include information about unmet demand for workers for the target occupation. This information must come from regional employers and must include current and projected vacancies and any projected increase in demand for the targeted occupation and skills, as well as credentials required for entry, to demonstrate that the occupation is of critical importance to employers in the region and that there is a need for the development of a training and placement program.

There is a growing body of research demonstrating that job seekers benefit from starting at a higher wage and by participating in programs that provide information and coaching on career continuums beyond the first entry-level job. While we have not set a wage floor for proposed occupations, applicants will be required to provide evidence that the programs will place participants in jobs in which the combination of wages, employer-supported benefits and upward mobility pathways are likely to support the goal of increased earned income and economic stability.

Such evidence might include:

* the proposed target occupation has attainable opportunity for career advancement and wage progression within a reasonable time frame
* the employer partners invest in supporting entry-level employees’ career advancement
* the employer partners provide sufficient benefits to support a transition from public benefits receipt in preparing for career advancement

1. ***Program Requirements:*** Grant awards will support organizations that propose a set of services to enroll returning citizens into an occupational skills training program that will result in job placement. Successful applicants will:
   * Propose an enrollment and training schedule that allows for at least 30-day retention of placements by June 30, 2022 with anticipated continued employment past the end of the grant period
   * Provide clear evidence of commitment to relevant roles and responsibilities from partnership members.

* Provide intensive, trauma-informed, supportive case management and maintain case notes for each participant; case management services must include connecting with other service providers/reporting partners such as probation/parole officers and mental health providers/clinical support
* Provide a post-release, cohort based, occupational skills training and placement program that addresses the employers’ workforce needs, prepare participants for success in the targeted occupation(s), optimizes opportunities for participant learning and career development, and will result in participants’ placement in the target occupation(s). This may include:
* Basic education, including ABE, GED, ESOL, math, computers/technology contextualized to the industry and occupation(s)
* Vocational training
* Post-secondary education and credentialing
* Apprenticeship
* On-the-job training
* Paid work experience
* Develop and implement a recruitment, assessment and selection process which is racially and culturally reflective of the institution’s population and/or the population released in the community. Applicants may propose to begin this process pre-release with a goal of selecting and preparing individuals for immediate enrollment in the proposed post-release occupational skills training and placement program. The recruitment, assessment and selection process must ensure that:
  + Individuals selected to participate in the program are willing and able to work and view the program as a resource to prepare them for work in the target occupation(s)
  + Individuals are aware of the target occupation(s)’ job description(s), duties, physical requirements, schedule and work environment(s) prior to applying to the program
  + Individuals have the pre-requisite skills to succeed in the program, prior to enrolling in the program
* If proposed strategy includes a behind the wall component, applicants shall engage and identify key personnel within the HOC/DOC to create a proposed client/cohort flow through services provided within the HOC/DOC. This should include, but is not limited to inmate movement, schedules, availability of textbooks, transportation, etc.
* Assign a job developer who is responsible for active outreach to and engagement with above mentioned employers to identify and secure unsubsidized job placements in the target occupation(s) for program participants by the end of the grant period
* Provide support services to participants including transportation and childcare to alleviate barriers to completion and unsubsidized employment.

1. ***Outcome Expectations***: Applicants must propose realistic, attainable job placement goals, subject to review & approval by the proposal review committee. Applicants must explain why the proposed placement rate and cost per placement is appropriate for the target population and the proposed program. This explanation should cite specific performance rates documented for a similar program design, serving a similar population.

Section Four: Administrative Requirements

1. ***Participant Level Data Reporting Requirements*:** Grantees will be required to enter participant level data into a database provided by Commonwealth Corporation. Data will include basic demographics, services received and outcomes achieved, and shall be updated on a regular basis
2. ***Program Progress Reporting Requirements:*** Grantees will be required to submit the following narrative reports using templates supplied by Commonwealth Corporation:

Quarterly Reports: These reports will be due quarterly and will include an update and reflection on progress in meeting performance measures and reporting the project’s successes and challenges. Grantees will also be responsible for entering participant level data into the provided database on a minimum of a quarterly schedule.

Final Report: This report will be submitted at the end of the contract period and will document what was achieved through the investment of these funds, inform future funding practices and provide information that could be used more generally among organizations doing similar work. The format for this report will be provided to grantees after a contract is awarded.

1. ***Program & Fiscal Monitoring:*** Commonwealth Corporation is responsible for ensuring that organizations receiving grant funds:
2. Maintain the fiscal and program systems needed to meet all relevant federal and state requirements.
3. Meet the terms of the grant award outlined in the contract with Commonwealth Corporation.
4. Provide quality services to program participants; and
5. Expend grant funds only for allowable activities.

To fulfill this responsibility, Commonwealth Corporation will periodically request and review documentation related to the grantee organization and grant expenses and activities. Additional information will be provided after a contract is awarded.

1. ***Technical Assistance:*** Each grantee will be assigned a Commonwealth Corporation Program Manager and must assign a main point of contact at their organization who is accountable for the grant. The Commonwealth Corporation Program Manager will be available to support grantees through the duration of the grant, answering questions about operational issues as well as providing technical assistance to ensure grantees meet their performance outcomes. Successful applicants, regardless of when their Implementation Plan is submitted, will be required to participate in seven (7) monthly TA sessions. A detailed schedule of convenings will be provided upon award.
2. ***Payment:*** Funds will be disbursed on a cost reimbursement basis. Grantees will be required to submit invoices on a monthly basis using an invoice template, supplied by Commonwealth Corporation. Grantees will only be reimbursed for expenses incurred during the period of the contract. Grantees are required to maintain and submit, upon request, back-up documentation for expenses.
3. **Amendments:** Grantees may request up to two (2) budget amendments per funding cycle. The final deadline for amendment submission is April 30th, 2022
4. ***Project Terms and Conditions*:**  Grantees will be required to abide by Commonwealth Corporation’s Standard Contract Terms and Conditions which will be provided during contract negotiation. Applicants may review these terms and conditions prior to submitting an application by contacting Zac Rich at [zrich@commcorp.org](mailto:zrich@commcorp.org) to request a copy. In addition, all final contracts are subject to negotiation of a final statement of work.

Section Five: Submission Schedule & Instructions for Submission

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| --- | --- |
| **Activity** | **Date** |
| Request for Proposals Released | September 1st, 2021 |
| Deadline to Submit Written Questions | September 20th, 2021 |
| All Answers to Written Questions Posted on Website | September 22ndt, 2021 |
| Applications Due | October 1st, 2022 by 5pm |
| Applicants Notified of Status | October, 2021 |
| Anticipated Contract Start Date | November 1st, 2021 (tentative) |
| Contract End Date | June 30, 2022 |

* 1. ***Clarification Period:*** Questions about this Request for Qualifications will be accepted in writing through September 20th, 2021 by 5:00 PM. Please submit all questions via email to Zac Rich at [zrich@commcorp.org](mailto:abritt@commcorp.org). All questions will be responded to and posted on Commonwealth Corporation’s website at [www.commcorp.org](http://www.commcorp.org) on a weekly basis and no later than September 22nd, 2021. Applicants can sign up at the following link to receive email notifications when new responses are posted: <https://commcorp.tfaforms.net/328903>. However, all potential applicants are advised to check the Commonwealth Corporation’s website periodically for additional information and updates until submissions are due.
  2. ***Qualifications Submission Instructions:*** Applications are due on October 1st, 2021 by 5:00 PM. Please upload your digital submission to the following link: <https://commcorp.tfaforms.net/328902>. In order to upload your submission, you will need to complete a form that provides the following information: (1) the **Name** of the lead applicant organization, (2) the lead applicant organization’s **Federal Employer ID Number**, (3) the lead applicant organization’s **Department of Unemployment Assistance ID Number**, (4) the **Total Program Design Funds Requested**, and (5) the lead applicant organization’s **Primary Contact Person** (to be notified upon decision of grant award).Applicants should review all components prior to uploading in order to ensure they have completed all the required information. Narrative forms must be submitted in MS Word file format. Budgets must be submitted in MS Excel file format. Signed MOAs or letters of commitment must be scanned and submitted in the form of a single PDF file. COGS must be submitted in the form of a single PDF file. Should you encounter any submission issues, please contact Zac Rich at [zrich@commcorp.org](mailto:abritt@commcorp.org).
  3. ***Qualifications Submission Package Components:*** The following documents make up the required components of the Qualifications Submission Package. Failure to provide any of the documents or materials listed below may result in the disqualification of the application.
  4. *Project Profile:* Attachment 1 is the Project Profile. Complete each question on the Project Profile. You may adjust the spacing in this section to accommodate your answers. Do not delete any of the questions. There is no page limit for Attachment 1, but we ask that you limit responses only to what is necessary to answer each question sufficiently.
  5. *Program Design Narrative Form:* Respond to all questions on the Program Design Narrative Form. Attachment 2 has a five-page limit including charts. We ask that you limit responses only to what is necessary to answer each question sufficiently. You may adjust the spacing in this section to accommodate your answers. Do not delete any of the questions.
  6. *Partnership Qualifications Chart:* The Partnership Qualifications Chart asks you to describe *which partner* has the relevant experience or expertise for each required qualification that is listed. *Please refer to Section 2 for a more detailed list of qualifications.* You should include specific examples of their experience or expertise in the designated area. It is likely that their qualifications will align with their specific role during the Program Design or Implementation Phase. While it is likely that multiple partners may have the required qualifications, we ask that you list at least one but no more than two (2) organizations for each category, and keep in mind that all partnerships are required to include at least two Massachusetts-based businesses, one MassHire Workforce Board, one MassHire Career Center, and the regional HOC or DOC facility. Do not delete any of the questions. Attachment 3 has no page limit and you may adjust the spacing in this section to accommodate your answers; however, we ask that you limit responses only to what is necessary to answer each question sufficiently.
  7. *Memorandum of Agreement or Letter of Commitment:* Each partner must demonstrate their commitment to the design and implementation process for this initiative. Each partner must also outline their role and anticipated activities. Each partner’s commitments, roles and activities must be provided either through a signed Memorandum of Agreement (MOA) among partners or through the submission of separate letters of commitment. This component pertains to all partners in addition to the required employer partners. *See Section 2 for more information about required partner commitments.*
  8. *Program Design Phase Budget, Budget Narrative, and Outcome Chart***:** Attachments 5a, 5b, and 5c are the Program Budget, Budget Request Narrative, and Outcome Chart Forms. These are included as a separate MS Excel Workbook labeled “Program Budget Forms.” You must submit a detailed budget request using the provided forms. The budget will also become the financial basis for any grant award, and for making cost reimbursement payments over the course of the duration of the grant period. Awardees will be able to revisit their proposed budget and outcome charts as a part of their Implementation Plan and make reasonable adjustmets, pending Commonwealth Corporation approval. Commonwealth Corporation reserves the right to modify application budgets prior to and/or after grant award.
  9. *Certificate of Good Standing:* All **lead applicants**\* must submit a Certificate of Good Standing from the Massachusetts Department of Revenue. This should be included in your Qualifications Submission Package and labeled Attachment 7.**\*Please note that community colleges, public vocational technical high schools, and public state universities serving as the lead applicant do not need to submit a Certificate of Good Standing.**

Section Six: Proposal Evaluation Process and Criteria

1. ***Proposal Evaluation Process***: Proposals submitted in response to this solicitation will be evaluated by Commonwealth Corporation. Representatives of the Executive Office of Labor and Workforce Development may participate in this process.

The review process will consist of the following steps:

**Step 1: Threshold Criteria Screening**

Submissions will be screened for completeness, conformity to the program requirements and timeliness of response. Submissions that are incomplete, non-conforming, or late may not be considered.

**Step 2:** **Compliance Screening**

Commonwealth Corporation will conduct an analysis to ensure all applicants are in compliance with state and federal law. Applicants are encouraged to review these criteria and ensure they are in compliance prior to submitting an application. Commonwealth Corporation will conduct the following reviews to ensure compliance:

* Ensure applicants are in good standing with the Massachusetts Department of Revenue. Commonwealth Corporation will conduct this screening by reviewing the Certificate of Good Standing (C.O.G.S) submitted in the Grant Application Package. **Please note that community colleges, public vocational technical high schools and public state universities serving as the lead applicant do not need to submit a Certificate of Good Standing.**
* Please follow this guidance when requesting and submitting a Certificate of Good Standing from the Department of Revenue:
  + The Certificate of Good Standing from the Department of Revenue is not the same and should not be confused with a Certificate of Incorporation from the Secretary of State
  + This is a link to a sample C.O.G.S: <http://www.mass.gov/lwd/docs/dcs/wtf/dor-cert-good-standing.pdf>
  + C.O.G.S. must be less than six months old
  + Please visit the Department of Revenue’s website (<http://www.mass.gov/dor/businesses/programs-and-services/certificate-of-good-standing.html> ) for more information about the C.O.G.S and to complete an online application to obtain a Certificate
  + Applications for a C.O.G.S can take 4-6 weeks to be processed
* Ensure applicants are in full compliance with all obligations to the Department of Unemployment Assistance, Department of Industrial Accidents, and any other obligations to the Commonwealth of Massachusetts. Commonwealth Corporation will work with the Department of Unemployment Assistance to conduct this review.

**Step 3: Review Committee**

A review committee will read, review, and score all eligible submissions. Review results will be documented. EOLWD and Commonwealth Corporation reserve the right to request additional information from any applicant to ensure that the review committee has a complete understanding of the program concept.

|  |  |
| --- | --- |
| **Category** | **Point value** |
| Track record of success and qualifications/capacity of applicant and partner organizations to ensure a sufficient number of appropriate individuals are recruited and that participants are provided with the supports and services to prepare and place them into unsubsidized employment at the completion of the grant period | 20 |
| Track record of being able to recruit, serve, and partner with racially, culturally diverse, and community reflective program participants and organizations to address the needs of the target population and/or;  Track record of practicing culturally responsive services in the community as evidenced by current or long-standing and diverse partnerships | 10 |
| Strong job placement strategy that is likely to result in placement and retention for a majority of program completers within career-track employment & sustainable wage positions | 30 |
| Strong MOA detailing partner roles, including strong commitments from employers that indicate a strong likelihood that employers will hire program completers, and detailed plans with HOC/DOC if program is targeting individuals prior to release | 25 |
| Budget aligns with the proposed program design and the proposed enrollments and outcomes are appropriate given the expenses of the program | 15 |

**Step 4:** All applicants will be notified of their award status by email.

1. ***Additional Terms:*** In addition to the scoring system outlined,Commonwealth Corporation reserves the right to only consider submissions that, in our sole judgment, are complete and responsive to the solicitation’s requirements and include all required application components. Additionally, Commonwealth Corporation and the Executive Office of Labor and Workforce Development reserve the right to consider other criteria in making competitive awards among comparably qualified applicants. Commonwealth Corporation reserves the right to reject any and all applications, or to accept any and all applications, in whole or in part, if deemed to be in the interest of the Commonwealth Corporation or the Commonwealth of Massachusetts to do so. This RFP does not commit Commonwealth Corporation to award any contracts. Upon submission, all applications become the property of Commonwealth Corporation. Commonwealth Corporation is not responsible for electronic submissions that are not received by Commonwealth Corporation. Commonwealth Corporation also reserves the right to renew and extend the contract beyond the initial contract period if funding is available in future years.
2. ***Appeals:*** Appeals of the funding decision may be filed with Christine Abrams, President of Commonwealth Corporation, 2 Oliver Street, 5th Floor, Boston, MA 02109. Appeals must be filed within fifteen days of the date of Commonwealth Corporation’s notice to unsuccessful bidders. The president may decide to hold an informal review of the decision, and may decide to grant an appeal, deny an appeal, or modify an award based on information provided during the informal review.
3. ***Audited Financial Statements and Verification of Fiscal Management Capacity****:* All applicants that are selected for an award will be required to submit a copy of the organization’s most recent audited financial statement prior to the execution of a final contract.In addition, prior to the grant award, Commonwealth Corporation staff may review an organization’s fiscal systems and internal controls to verify that the organization has the capacity to manage public grant funds and administer the program.

Section Seven: Summary of Attachments

The following attachments must be submitted by all applicants:

* Attachment 1: Project Profile
* Attachment 2: Program Narrative Form
* Attachment 3: Partnership Qualifications Chart
* Attachment 4: Memorandum of Agreement or Letter of Commitment
* Attachment 5a, 5b, and 5c:
  + Program Budget,
  + Program Budget Narrative, and
  + Outcome Chart
* Attachment 6: Target Occupation Worksheet
* Attachment 7: Certificate of Good Standing

**Attachment 1: Project Profile**

Please complete each question on the Project Profile. You may adjust the spacing in this section to accommodate your answers. Do not delete any of the questions. There is no page limit for Attachment 1, but we ask that you limit responses only to what is necessary to answer each question sufficiently.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PROJECT PROFILE** | | | | | | | | | | |
| **Name of Lead Applicant Organization** | |  | | | | | | | | |
| **Applicant Type:** Please select (x) the type of organization that represents the lead organization. | | | | | | | | | | |
| ❑ Community-Based Organization, including Adult Basic Education Providers  ❑ House of Corrections or Department of Correction  ❑ Nonprofit Education, Training, or Other Service Provider | | | | | ❑ Local Workforce Development Entity  ❑ Local Workforce Board  ❑ Nonprofit Education, Training, or Other Service Provider  ❑ One-Stop Career Center | | | | | |
| **Department of Unemployment Assistance ID Number (DUA ID)** | |  | | | | | **Federal Employer ID Number (FEIN)** | | |  |
| **Total Program Design Funds Requested** *(up to maximum of $160,000)* | |  | | | | | | | | |
| **Cities and Towns Served by Program** | |  | | | | | | | | |
| **Target Industry and Occupation** | | Industry: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |
| **PROPOSAL SUMMARY**  *In the space provided below, please provide a brief summary of your proposal in* ***no more than*** ***400 words****. Please keep in mind that if your application is awarded funding, this summary will be used in public announcements.* | | | | | | | | | | |
|  | | | | | | | | | | |
| **LEAD APPLICANT CONTACT INFORMATION** | | | | | | | | | | |
| **Role** | **Name / Title** | | | **Address** | | | | **Phone** | **Email** | |
| **Primary Contact Person** (notified upon decision of grant award) |  | | |  | | | |  |  | |
| **Authorized Signatory** (authorized to commit organization) |  | | |  | | | |  |  | |
| **Fiscal Contact**  (fiscally responsible for project funds and submitting invoices) |  | | |  | | | |  |  | |
| **Project Manager,** if known (contact over the course of the project) |  | | |  | | | |  |  | |
| **PARTNERSHIP MEMBERS AND CONTACT INFORMATION**  Please list the organizations and contact information for all required\* and additional partners.  *All partners listed below must have submitted a MOA or Letter of Commitment.* | | | | | | | | | | |
| **Organization Type** | **Organization Name** | | **Address** | | | **Contact Name / Title** | | | **Phone / Email** | |
| **Employer Partner 1\*** |  | |  | | |  | | |  | |
| **Employer Partner 2\*** |  | |  | | |  | | |  | |
| **Community-Based Organization\*** |  | |  | | |  | | |  | |
| **MassHire Workforce Board\*** |  | |  | | |  | | |  | |
| **MassHire Career Center\*** |  | |  | | |  | | |  | |
| **House of Corrections/Department of Correction\*** |  | |  | | |  | | |  | |
| **Probation/Parole (If applicable)** |  | |  | | |  | | |  | |
| **Other Relevant Partners…** |  | |  | | |  | | |  | |
|  |  | |  | | |  | | |  | |

Attachment 2: Program Application Narrative Form

Respond to all questions on the Program Design Narrative Form. Attachment 2 has a five-page limit including tables, charts, figures, and appendixes. We ask that you limit responses only to what is necessary to answer each question sufficiently. You may adjust the spacing in this section to accommodate your answers. Do not delete any of the questions.

1. ***Past Performance:*** We are interested in funding organizations that have a track record of success and qualifications/capacity with grant management and fiscal coordination of workforce development programs. Please tell us about a recent grant for the same or similar program that the lead applicant was responsible for managing. Within your response, which may include a table or other visual representation, please provide the following:

* name of the funding agency/organization and the source of funds,
* amount of funds,
* period of performance,
* number of participants,
* how you measured the success of your program, and
* specific performance data.

2.***Need for Project:*** Within this section, please describe the need for your proposed program within your region by addressing the following points:

1. What is the geographic area you are proposing to serve?
2. What labor market problem are you seeking to solve?
3. What has worked well within your partnership or an existing program that can be built upon?
4. What is currently not working within your partnership or an existing program and how do you propose to address it by engaging with us during the two-month Program Design Phase? Please describe your priorities, including how the integration of job training and case management services might address this previously described labor market problem?
5. *As informed by your partnership discussions with local MassHire system partners,* please provide context for how your proposed program aligns with the priorities identified through the Regional Workforce Skills Planning Initiative regional blueprint process as well as with your own organization’s priorities for the next 6 months.
6. ***Target Population:*** Within this section, please describe the specific population that you plan to serve in accordance with the criteria outlined in Section 1 by responding to the following points:
7. Describe the specific target population you plan to serve (this can be a more specific sub-set of the returning citizen target population criteria outlined in Section 1).
8. Define your partnership’s understanding of cultural competency. Describe your process, training protocols, and/or strategies for implementing culturally responsive recruiting and program planning.
9. Provide an explanation of why your chosen population is an appropriate match with the proposed target occupation(s) described in Attachment 2, Section 4.
10. Describe how you anticipate recruiting individuals for the program. Your response may reference the track record and experience of partnership member organizations in recruiting and working with the target population.
11. What barriers to employment does this population have? How will you work with participants to address these barriers?
12. Describe how you have or are thinking of approaching your engagement with the proposed target population differently in the context of the COVID-19 pandemic and the racial inequities historically associated with long periods of economic recovery in the United States.

4. ***Target Occupation*:** Within this section, please describe the specific occupation that you plan to target in accordance with the criteria outlined in Section 3 and explain the regional demand for the proposed target occupation by addressing the following points:

1. Which occupation will your program prepare participants for?
2. How did your partnership determine that there are and will be a sufficient number of vacancies in this occupation within your region?
3. Given the growing importance of flexible work options amidst the COVID-19 pandemic, how would you describe the current or potential availability of telework options for this occupation?
4. Based on your conversations with employers and other evidence, how would you describe the opportunities for advancement within this occupational track?
5. Using the table below, provide evidence that there will be sufficient job vacancies in the target occupation among partner employers when participants are prepared for placement (over the duration of the implementation period: approximately 11/1/2021 – 6/30/2022):

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regional Employer Demand Chart**  \**You must include at least your two employer partners below.*  *You may add rows to the table for additional employers as needed.* | | | | | | |
| **Employer** | **Target Occupation Title** | **Number of Current Vacancies in Occupation** | **Number of Anticipated Job Openings Over Duration of Implementation** | **Skills Required for Entry *(including English language skills)*** | **Credentials Required for Entry** | **Average Hourly Wage**  **At Entry** |
| **Name of Employer Partner 1\*:** |  |  |  |  |  |  |
| **Name of Employer Partner 2\*:** |  |  |  |  |  |  |
| **Name of Employer Partner 3:** |  |  |  |  |  |  |

**Attachment 3: Partnership Qualifications Chart**

In the following Partnership Qualifications Chart, describe *which partner* has the relevant experience or expertise for each required qualification listed below. **Please include specific examples of their experience or expertise in the designated area and cite specific performance data**, where available (e.g. job placement outcomes, number of participants, etc.). It is likely that their qualifications will align with their specific role during the Program Design or Implementation Phase. While it is likely that multiple partners may have the required qualifications, **please list at least one but no more than two (2) organizations for each category**, and keep in mind that all partnerships are required to include at least two Massachusetts-based businesses among other required partners. Partner organizations may be repeated. Do not delete any of the questions. Attachment 3 has no page limit and you may adjust the spacing in this section to accommodate your answers; however, we ask that you limit responses only to what is necessary to answer each question sufficiently. *Please refer to Section 3 for a more detailed list of qualifications.*

| **Required Role Qualifications and Program Partners Chart** | | | |
| --- | --- | --- | --- |
| **Qualification** | **Organization Name** | **Partnership Member Contact Name and Title** | **What Relevant Experience or Expertise Does This**  **Partner Contribute to the Partnership?**  *Please cite specific performance data where available* |
| ***Example:***  **Strategies for Outreach to the Target Population & Referral Capacity** | *XYZ Organization* | *John Doe, Program Director* | * *Managed recruitment for Ready 2 Work Program from 2015-2019. This program focused on recipients of immigration services in Malden.* * *Recruitment efforts resulted in 25 interested candidates and 8 enrolled participants for each cycle of training across 4 cycles annually.* |
|  |  |  |  |
| **Cultural Competence and Responsiveness** | 1. |  |  |
| 2. |  |  |
| **Strategies for Outreach to the Target Population & Referral Capacity** | 1. |  |  |
| 2. |  |  |
| **Comprehensive Case Management and Transitional Coaching to Support Individuals in the Context of Re-Entry** | 1. |  |  |
| 2. |  |  |
| **Expertise in Training Services for Returning Citizens** | 1 |  |  |
| 2. |  |  |
| **Expertise with Technical, Soft Skill and Work Readiness Requirements** | 1. |  |  |
| 2. |  |  |
| **Expertise in Workforce Training (including Virtual)** | 1. |  |  |
| 2. |  |  |
| **Expertise in Competency-Based**  **Work Experience** | 1. |  |  |
| 2. |  |  |
| **Job Development, Placement, and Retention Services** | 1. |  |  |
| 2. |  |  |

**Attachment 4a: Sample Memorandum of Agreement (HOC/DOC)**

**(*NAME of Partnership*)**

**I. Purpose of This Memorandum**

This Memorandum of Agreement (MOA) outlines the agreement among the partners listed below. Partners are committed to implementing a program design that includes the following features:

* Along with Lead Applicant, designing implementation protocols and developing training program curricula to ensure that they are aligned with entry requirements for jobs for the target population.
* Strategies that address enrollment, occupational and academic skills instructions, job development, and job placement for returning citizens and the target occupation(s)

**II. Term**

This MOA shall be in effect from \_\_\_\_\_\_\_\_\_\_and shall end on\_\_\_\_\_\_\_\_\_\_. This MOA may be terminated prior to the effective end date upon the full written approval of all the partners.

**III. Partners**

List the names of each institutional partner participating in the membership

**IV. Common Roles & Expectations of Partners**

**All Parties agree to (examples):**

1. Communicate consistently through e-mail and phone calls, reading all relevant e-mails, listening to voice mail messages, and responding in a timely manner.
2. Work together to solve problems, make decisions, create opportunities for program participants, and support participants’ success.
3. Hold participants to program standards
4. Deliver consistent messages, and provide a structured, safe, culturally responsive learning environment.

**V. Individual Partner Roles & Expectations**

Outline the specific roles and expectations of each partner, which may include:

* Coordinate program logistics and oversee day-to-day operations.
* Provide career readiness training and ensure completion of all work readiness.
* Handle all fiscal and data requirements for the grant.
* Help recruit individuals who are a good fit for the program
* Support participants in addressing challenges outside of the program that might interfere with their success in the program.
* Provide teachers, space, and equipment for teaching occupational skills.
* Provide paid work experience.
* Evaluate participants and provide honest feedback to and all partners about participants’ progress.
* Participate in the design of assessment/screening protocols and training program curriculum to ensure graduates of the program meet hiring standards.
* Provide participant level data to the lead applicant
* Provide the talents and support of hiring managers to design a program that will meet their workforce needs and lead to job placements

*Required Institutional Partners (HOC/DOC) must sign the MOA with the following commitments:*

(Institution) agrees to identify key personnel to participate in the design of protocols and training program implementation to ensure target population has a clear, identified client flow though proposed behind-the-wall service offerings.

(Institution) agrees to work with lead applicant to discuss and address anticipated service delivery barriers

**V. Signatures**

Have each partner’s representative sign and date the MOA. Make sure the signatories have contractual authority for their organization.

**Partner Organization Name**

**Signatory Name**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Partner Organization Name**

**Signatory Name**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Attachment 4b: Sample Memorandum of Agreement (Business Partner/Employer)**

**(*NAME of Partnership*)**

**I. Purpose of This Memorandum**

This Memorandum of Agreement (MOA) outlines the agreement among the partners listed below. Partners are committed to implementing a program design that includes the following features:

* Involvement of business partners in designing assessment/screening protocols and in developing training program curricula to ensure that they are aligned with entry requirements for jobs;
* Case management to ensure participants find and remain in jobs after completing the training program;
* Strategies that address enrollment, occupational and academic skills instructions, job development, and job placement for returning citizens and the target occupation(s);
* Demonstrated vacancies; and
* Hiring commitments to place the target population in the above-mentioned vacancies

**II. Term**

This MOA shall be in effect from \_\_\_\_\_\_\_\_\_\_and shall end on\_\_\_\_\_\_\_\_\_\_. This MOA may be terminated prior to the effective end date upon the full written approval of all the partners.

**III. Partners**

List the names of each business partner participating in your membership

**IV. Common Roles & Expectations of Partners**

**All Parties agree to (examples):**

1. Communicate consistently through e-mail and phone calls, reading all relevant e-mails, listening to voice mail messages, and responding in a timely manner.
2. Work together to solve problems, make decisions, create opportunities for program participants, and support participants’ success.
3. Hold participants to program standards
4. Deliver consistent messages, and provide a structured, safe, culturally responsive learning environment.

**V. Individual Partner Roles & Expectations**

Outline the specific roles and expectations of each partner, which may include:

* Coordinate program logistics and oversee day-to-day operations.
* Provide career readiness training and ensure completion of all work readiness.
* Handle all fiscal and data requirements for the grant.
* Help recruit individuals who are a good fit for the program
* Support participants in addressing challenges outside of the program that might interfere with their success in the program.
* Provide paid work experience.
* Evaluate participants and provide honest feedback to and all partners about participants’ progress.
* Participate in the design of assessment/screening protocols and training program curriculum to ensure the target population of the program meet hiring standards.
* Provide participant level data to the lead applicant
* Provide the talents and support of hiring managers to design a program that will meet their workforce needs and lead to job placements

*Required Business Partners must sign the MOA with the following commitments:*

(business name) agrees to identify hiring managers to participate in the design of assessment/screening protocols and training program curriculum to ensure graduates of the program meet hiring standards.

(business name) agrees to hire (number of graduates to be hired) graduates at an average starting hourly wage of (average starting hourly wage).

OR

(business name) agrees to interview (number of graduates) and hopes to fill (#of positions) with program graduates.

**V. Signatures**

Have each partner’s representative sign and date the MOA. Make sure the signatories have contractual authority for their organization.

**Partner Organization Name**

**Signatory Name**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Partner Organization Name**

**Signatory Name**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**

Attachment 5a, 5b, & 5c: Budget, Budget Narrative, & Outcome Chart Forms

**General Instructions:** The proposed budget must be submitted using the following attachments provided in MS Excel file format:

1. Budget Form (Attachment 5a)
2. Budget Request Narrative Form (Attachment 5b)

***Budget Form (Attachment 5a):*** serves as a cover sheet to the Budget Request Narrative Form. While it is formatted with formulas, please check all amounts for accuracy prior to submission.

***Budget Request Narrative Form (Attachment 5b):*** outlines all of the project costs for which you are requesting grant funds. This budget should be based upon the entire requested grant duration (up to June 30, 2022).

Each line item amount should have clear and sufficient cost rationale. Applicants must complete the following columns for each line item for which they are requesting funds.

* ***Actual Cost (AC) or Cost Allocation (CA):*** Please identify whether these expenses will be charged based upon actual costs or a cost allocation plan. Please note: Applicants awarded funding will be required to provide a copy of their cost allocation plan during contract negotiations. If the cost allocation plan does not include sufficient detail or is updated on a monthly or ongoing basis, this updated information must be included along with other required back-up during specified monthly invoices. Any changes to this plan must be submitted to Commonwealth Corporation for the duration of the grant.
* ***Description of use of funds:*** Please include a description to explain how funds will be used.
* ***Calculations:*** To reduce calculation errors, please use these two columns to include the rate and unit of measurement used to calculate each line item. Instructions for specific line items are included below in the Category Instructions. Applicants may include additional detail in the ***description of use of funds*** column to explain any expenses that do not conform to the standard unit of measurement @ rate calculation format.

***Outcome Chart:*** The outcome chart must be submitted using Attachment 4 provided in the MS Excel file format. This form summarizes the key anticipated outcomes for the proposed project. These outcomes will be incorporated into the final contract. In addition to the outcomes listed here, grantees will be required to collect other information about participant demographics, wages, and other project results.

Please enter goals under the column labeled “goal.” Then show the anticipated distribution of goals by quarter by entering the cumulative goal per quarter under each corresponding quarter. We have programmed formulas that will automatically calculate the performance rates under the column labeled “rate” for each performance measure.

* **Section I: Enrollment & Completion Goals:**
  + *Number of participants enrolled in training program:* Please enter the total number of participants that will be enrolled in the proposed training program and the anticipated cumulative total number by quarter.
  + *Number of participants completing training program:* Please enter the total number of participants that will complete the proposed training program and the anticipated cumulative total number by quarter.
  + *Number of participants earning an industry recognized credential as a result of training:* Please enter the total number of participants that will earn an industry recognized credential as a result of training and the anticipated cumulative total number by quarter. If the industry does not recognize or require an industry recognized credential and the proposed program design does not result in an industry recognized credential leave this field blank.
* **Section II: New Employment Goals:**
  + *Number of participants placed in unsubsidized employment and retain it for at least 30 days:* For this question, enter the number of un/underemployed that will obtain a job and retain it for at least 30 days during the period of the grant and the anticipated cumulative total by quarter.
  + *Average Hourly Wage at Placement:*Please enter the anticipated starting hourly wage at placement for participants that will be placed in training related unsubsidized employment.

Please follow the Category Instructions below for completing the Budget Request Narrative Form and remember to *check all amounts* for accuracy prior to submission.

**A. Salary & Fringe**

Salary: This category is for project costs related to staff that will be performing project-related functions and will be on the payroll of the lead applicant only.

The budget should include:

* each staff person (name, if known and job title) on a separate line
* actual rates of pay each staff person will receive for compensation in the column labeled “Rate/hour”
* the quantity of hours each staff person will work on this grant in the column labeled “hours”

Grantees may not invoice Commonwealth Corporation for staff roles that are not included on the budget in the contract. Grantees may charge a higher hourly rate than the rates listed in the budget in the contract. However, grantees are responsible for ensuring that the staffing structure outlined in the contract is maintained. Commonwealth Corporation will not approve a modification to add additional funds to staffing in order for the grantee to maintain the staffing structure included in the contract. Therefore, we encourage all grantees to review any significant staff changes with Commonwealth Corporation prior to making the change to ensure an adequate staffing structure is maintained. Applicants should factor in any proposed increases over the grant period into the average hourly rate.

Fringe: This line item is for fringe benefits for internal staff. The budget should include the percentage used to calculate the actual budgeted dollar amount. The budget should also include details about the benefits included in rate and the rate associated with each benefit.

**B.** **Other Program Costs**

Travel:This category is forlead applicantstaff travel required to achieve the project goals. The budget should include a description indicating the need for the proposed travel, destinations, and mode of travel. The budget should include the mileage rate in the column labeled “rate” and the total number of miles in the column labeled “unit.” Mileage will not be reimbursed beyond the current federally approved rates.

Space Rental**:** This category is for space rental related to project activity. If funds will be allocated on a cost allocation basis, the average monthly cost should be included in the column labeled “rate” and the duration of your grant in the column labeled “unit.” If costs will be charged on an actual cost basis the actual monthly cost of rent should be included in the column labeled “rate” and the duration of your grant in the column labeled “unit.”

Telephone & Communications**:** This category is for telephone and other communication costs related to project activity. If funds will be allocated on a cost allocation basis, the average monthly cost should be included in the column labeled “rate” and the duration of your grant in the column labeled “unit.” If costs will be charged on an actual cost basis the budget should include the actual monthly cost of telephone & communications in the column labeled “rate” and the duration of your grant in the column labeled “unit.”

Equipment Rental & Lease**:** This category is for rental or lease of office equipment necessary for implementation of the project. The budget should include a list of items to be leased. If funds will be allocated on a cost allocation basis, the average monthly cost should be included in the column labeled “rate” and the duration of your grant in the column labeled “unit.” If costs will be charged on an actual cost basis include the actual monthly cost of equipment rentals in the column labeled “rate” and the duration of your grant in the column labeled “unit.”

Equipment Purchase**:** This category is for equipment purchases. The budget should include a list of items to be purchased. The budget should include the cost of the item in the column labeled “rate” and the total number of units that will be purchased in the column labeled “unit.”

Postage & Mailings**:** This category is for postage and mailing related to project activity. The budget should include a description of the use of these funds. If funds will be allocated on a cost allocation basis, the budget should include an average monthly cost in the column labeled “rate” and the duration of your grant in the column labeled “unit.” If costs will be charged on an actual cost basis over the duration of the grant, the budget should include the total cost of postage in the column labeled “rate” and fill in a number “1” in the column labeled “unit.”

Publication/Print/Copying**:** This category is for publication, printing and copying related to project activity. The budget should include a description of the use of these funds. If funds will be allocated on a cost allocation basis, include an average monthly cost in the column labeled “rate” and the duration of your grant in the column labeled “unit.” If costs will be allocated on an actual cost basis over the duration of the grant, include the total cost of publication, printing and copying in the column labeled “rate” and fill in a number “1” in the column labeled “unit.”

Meeting Expenses**:** This category is for meeting expenses related to project activity. The budget should include a description of the use of these funds. The budget should include a meeting cost rate in the column labeled “rate” and the total number of meetings that will be held over the duration of your grant in the column labeled “unit.”

Office Supplies & Materials**:** This category is for office supplies related to project activity. The budget should include a description of use of these funds. If funds will be allocated on a cost allocation basis, the budget should include an average monthly cost in the column labeled “rate” and the duration of your grant in the column labeled “unit.” If costs will be charged on an actual cost basis over the duration of the grant, the budget should include the total cost of office supplies & materials in the column labeled “rate” and fill in a number “1” in the column labeled “unit.”

Marketing & Advertising**:** This category is for marketing and advertising related to project activity.

The budget should include a description of use of these funds. The budget should include the cost of the advertisement in the column labeled “rate” and the number of times you plan to run the advertisement in the column labeled “unit.”

Training Materials**:** This category is for expenses related to the purchase of training materials related to project activity. The budget should include a description of the training materials. The budget should include the cost per unit of the training materials in the column labeled “rate” and the cost per unit in the column labeled “unit.”

**C. Support Services**

Training Stipend: This category is for stipends paid to participants during their participation in classroom training. The budget should include the amount of the stipend in the column labeled “rate” and the total number of participants anticipated to receive the stipend in the column labeled “unit.”

Work Experience: This category is for wages and stipends paid to participants or wage subsidies paid to employers during work experience, including on-the-job training. The budget should include a description of the type of compensation (stipend, hourly wage for internship, wages for on-the-job training) and the number of weeks of employment. The budget should include the total maximum compensation that will be paid to or in the case of a wage subsidy, on behalf of each participant under the column labeled “rate” and the total number of participants anticipated to receive the stipend in the column labeled “unit.”

Transportation**:** This category is for transportation expenses related to the support of participants during training. The budget should include a description of the use of funds. The budget should include the average amount that will be provided per participant in the column labeled “rate” and the total participants in the column labeled “unit.”

Participant Tuition & Fees**:** This category is for tuition and fees associated with training slots for one or more participants. The budget should include the cost per participant in the column labeled “rate” and the total number of participants in the column labeled “unit.” Any costs that the applicant will contractually agree to pay a training provider for group instruction should not be included in this line item and should be included in the training contractors’ line item.

Other: This category is for other expenses related to the support of participants during training. The budget should include a description of the use of funds. The budget should include the average cost per participant in the column labeled “rate” and the total number of participants in the column labeled “unit.”

**D. Contracted Services**

Training Contractors: This category is for project costs related to training services provided to the grantee on a contract basis by individuals, organizations or companies that are subcontractors or consultants to the grantee.

If the cost of the course is negotiated at an hourly rate, the budget should include the hourly rate in the column labeled “rate” and the total number of instructional and preparation hours in the column labeled “unit.” If the cost of the course is negotiated at a course based rate, the budget should include the total cost of the course in the column labeled “unit” and the number of times the course will be offered in the column labeled “rate.” If rates vary by course, each course should be listed in a separate row. At a minimum each training provider should be listed on a separate line.

Curriculum Development Contractors: This category is for project costs related to the development of curricula. The budget should include a description of the use of funds including the name of the organization or individual that will be contracted to develop the curricula and the new courses that will be developed. The budget should include the hourly rate in the column labeled “rate” and the number of hours that will be spent developing the curricula in the column labeled “unit.”

Other Contractors:This category is for expenses related to other contracted services, including any contracted services to fulfill required staffing roles. The budget should include a description of the use of funds including the name of the organization or individual that will be contracted to perform this service. The budget should include the hourly rate in the column labeled “rate” and the quantity of hours each task will require in the column labeled “unit.” Each contractor should be listed on a separate line.

**E. Indirect Costs** This category is for indirect costs. Indirect costs are costs incurred for common or joint objectives that are not easily identifiable to a single grant and benefit multiple programs. Grantees must apply indirect costs through the use of an approved indirect cost rate or an approved cost allocation plan. A copy of the cost allocation plan must be supplied during contract negotiations. Any changes to this plan must be submitted to Commonwealth Corporation for the duration of the grant.

**Attachment 6: Target Occupation Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Employer** | **Occupation** | **Number of Current Vacancies in Occupation** | **Number of Anticipated Job Openings Over Duration of Grant** | **Skills Required for Entry** | **Credentials Required for Entry** | **Average Hourly Wage**  **At Entry** |
| Employer Partner 1 (provide employer name) |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Employer Partner 2 (provide employer name) |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |