

**Governor's  
Workforce  
Board**  
Rhode Island



Today's Vision... Tomorrow's Opportunity.

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# **Express Grant Application**

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**FY 2013**

**Incumbent Worker Training Grant Program**

The Honorable Lincoln D. Chafee  
Governor

Constance A. Howes  
Chair

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## **SECTION I - GENERAL INFORMATION**

### **A. PURPOSE**

The purpose of this Express Grant Program is to solicit applications for workforce improvement programs designed to increase the skills of the incumbent workforce. As a result of improving this capacity, the applicant must indicate how the business/organization will become more efficient, productive and competitive.

### **B. JOB DEVELOPMENT FUND**

The Job Development Fund (JDF), created by statute in 1992, is a state fund financed entirely by Rhode Island employers and administered by the Governor's Workforce Board. The Express Grant program is funded by the JDF in an effort to assist employers to improve the skills of their current workforce as well as the effectiveness of their business/organization.

### **C. AMOUNT OF ASSISTANCE**

Up to \$500,000 (depending on availability) has been allocated for approved projects within this initiative. The maximum amount awarded to an individual business/organization will be \$5,000 per fiscal year (July1-June 30).

Applicants are responsible to contribute a minimum of 50% of the allowable training expenses; however, applicants may apply to receive Bonus Funding to support their training. See Section III for details.

### **D. INQUIRIES**

Sherri Carello  
Governor's Workforce Board  
Bldg. 72, Second Floor  
1511 Pontiac Avenue, Cranston, RI 02920  
PHONE: (401) 462-8856 FAX: (401) 462-8865  
EMAIL: Sherri Carello at [scarello@dlt.ri.gov](mailto:scarello@dlt.ri.gov)

### **E. SCHEDULE OF APPLICATIONS DATES**

A schedule of due dates can be found on the GWB website. The GWB will review applications on a monthly basis.

### **G. SUBMISSION OF PROPOSALS**

Applicants may submit proposal electronically (preferred method) to [scarello@dlt.ri.gov](mailto:scarello@dlt.ri.gov) or by mail to:

Sherri Carello  
Governor's Workforce Board  
1511 Pontiac Avenue  
Bldg. 73-1  
Cranston, RI 02920

All applications must be filled out completely. A complete application consists of the proposal cover sheet, narrative and budget sections, bonus section (if applicable).

### **H. DURATION OF FUNDING**

Projects funded as a result of this RFP should plan for grant activity to occur between January 1, 2013 and June 30, 2013.

### **J. ELIGIBLE APPLICANTS**

Any Rhode Island for profit or not for profit organization (except those who received an Incumbent Worker Training Grant in 2012) may apply if they currently contribute to the Job Development Fund. This can be verified by contacting the RI Division of Taxation at 401-574-8710. Labor organizations, trade associations, or consortia of employers are also eligible to apply for training of their members. In this case, all participating member companies must contribute to the Job Development Fund. The names and RI Employer Identification Numbers for all participating organizations must be provided for verification purposes. Eligible applicants must be current on all Rhode Island tax obligations, must be in good standing with all divisions and programs administered by the Department of Labor and Training and must not have been debarred (prohibited) from contracting with an agency that administers federal funds.

**K. ALLOWABLE ACTIVITIES / PARTICIPANTS**

Applicants may request grant assistance for projects that train their incumbent employees or members (if a trade or labor organization) that have been employed for at least six (6) months. All trainees must be employees. Volunteers and board members are not eligible to participate in the training. Allowable training is flexible and should be based upon the employer's needs. Reimbursable activities cannot occur prior to the actual start date of the grant. Express Grants are meant to be used for short term training needs, therefore all training must take place within 90 days of the funding award date.

**L. REVIEW PROCESS**

Each proposal will be reviewed and evaluated for consideration by a team of volunteers consisting of members from the public and private sector. The team may also include previous grant recipients.

**M. LIMITATIONS**

This grant offering does not commit the GWB to award a contract or to pay for any of the costs in the preparation of a proposal.

The GWB reserves the right to accept or reject any or all proposals received as a result of this request, the right to cancel this offering in part or in its entirety, the right to fund any proposal either in part or in full, and the right to waive any and all requirements of the offering if it is in the best interest of the State of RI or GWB to do so.

All contract awards are subject to the availability of funds and the execution of a contract that is acceptable to both the selected respondent and the GWB.

**N. MONITORING**

Rhode Island General Law requires that the GWB provide for fiscal and accounting controls to monitor and audit all grant awards. Eligible applicants must agree to retain and preserve all records for three (3) years beyond the end of the contract period.

Monitoring consists of an on-site review of all program and fiscal grant activity. Back-up documentation of grant fund expenditures and the required applicant's cost are verified during the monitoring visit. Failure to provide documentation may result in the repayment by the recipient of all funds received.

**SECTION II – APPLICATION**

**GRANT PROPOSAL COVER SHEET**

**GOVERNOR’S WORKFORCE BOARD – FY2013 Express Grant - Incumbent Worker Training Grant Program**

**SECTION 1 - Applicant Information**

Name of Applicant:

Address:

Contact Person / Title:

Phone:  Fax:  Email:

Trade Association, Labor Organization, or consortia of employers applying on behalf of members:

Yes

No

Business / Organization Website:

Industry Sector Name:

North American Industry Classification Code (NAICS):

**SECTION 2 - Applicant Profile** (a mouse must be used to complete the following Yes/No questions)

For-Profit: Yes

Non-Profit: Yes

Total number of employees of business/organization:

Total number of members of Labor Organization:

Total number of employees in consortium of employers:

Total number of employees to be trained through this grant:

Total amount of grant assistance requested:

**SECTION 3 - Certification** (The name below must be of an individual with authority to enter into legally binding agreements on behalf of the applicant.)

If selected for award, I, the undersigned, agree to meet the requirements of the Rhode Island Job Development Fund for a grant award. I certify that all information contained in this application and proposal is true and accurate and understand that falsification of information may be cause for non-review or award revocation. I certify that the applicant organization is in compliance with all contributions; payment in lieu of contributions, interest or penalty charges due under Rhode Island unemployment law, in good standing with Workforce Regulation and Safety and has not been debarred from contracting with any agency that administers Federal funds. As an Eligible Applicant, I understand that I must be current on all Rhode Island tax obligations, must be in good standing with all divisions and programs administered by the Department of Labor and Training and must not have been debarred (prohibited) from contracting with an agency that administers federal funds. I understand that I have acquired no property or other right by virtue of submitting this application. If awarded, I agree to comply with the terms and provisions of this proposal.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

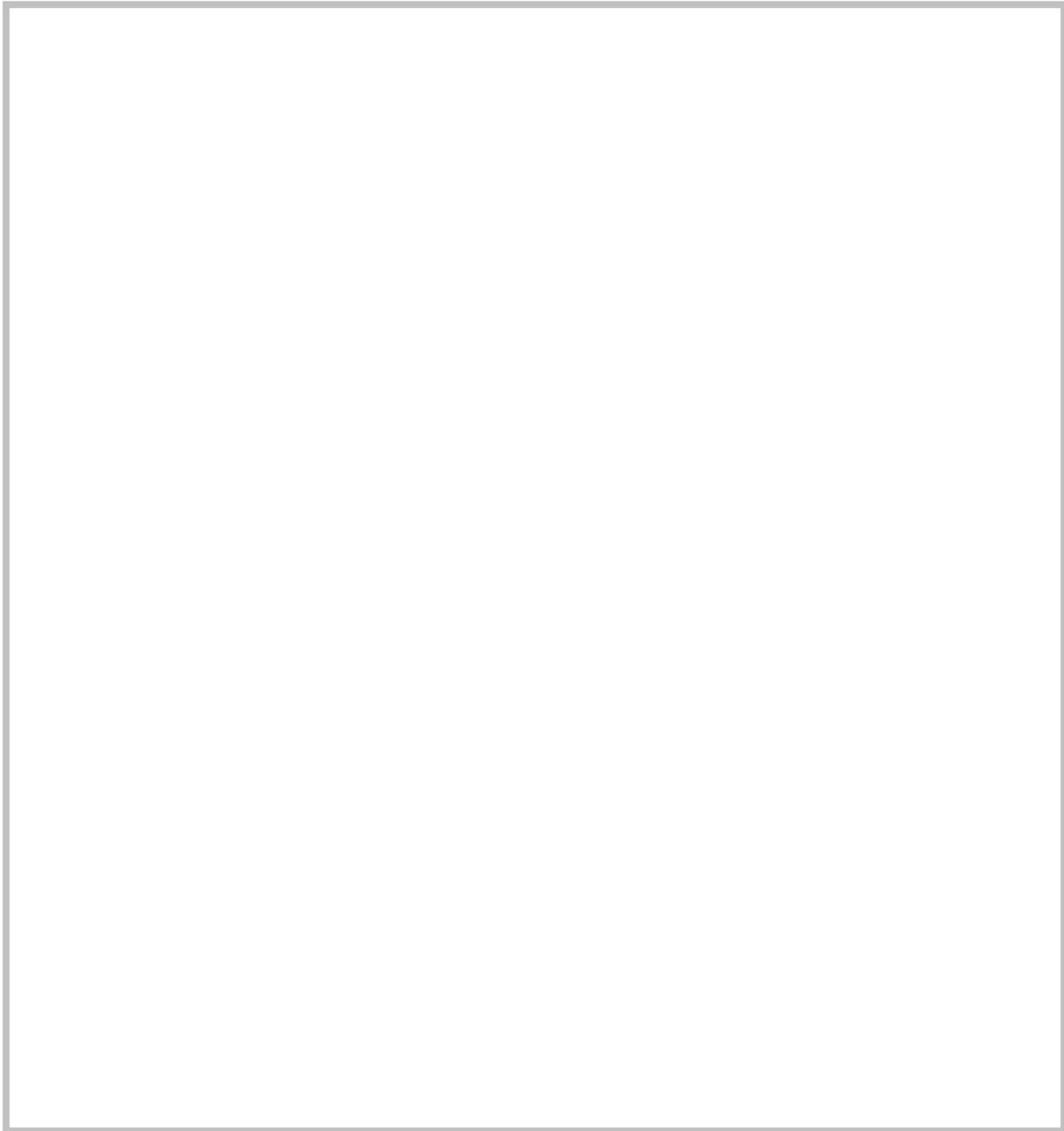
**Narrative Section: Needs Statement & Program Narrative**

Applicants should identify their current workforce challenges and explain how training will enable the organization to improve its productivity, competitiveness, and/or quality and increase the skills of the workforce.

This section should also answer the following “W” questions: who, what, where and when in reference to training activities.

- *Who will participate in the training?*
- *Who will conduct the training?*
- *What training programs are planned under this grant? Be as specific as possible.*
- *Where will the training take place?*
- *When will the training take place? Include start/end dates and number of hours for each training activity.*

***NOTE: Lengthy, wordy responses are unnecessary and will not enhance funding prospects.***



## **Narrative Section: Outcomes and Evaluation**

This section should address how the effectiveness of the training will be measured and evaluated in meeting the organization's needs (post-training expectations).

- Describe the intended outcomes for the proposed training.
- Describe how the training will be evaluated using quantifiable outcome measures.
- Define the measure of success that will be used to evaluate the training. Include information on the individual(s) conducting the evaluation and how results will be used to improve company processes.
- Up to 10% of the total grant award can be used for evaluation purposes. However, there must be a clear explanation of how these funds will be used.

Below is a list of some possible training outcomes. Please indicate which, if any, you expect to achieve with the training that you are proposing. If your project is funded, you will be asked to compare these projected outcomes with your actual outcomes to help evaluate the effectiveness of the training.

### **Expected Employee Outcomes: Check all that apply**

- |  | <u># of Employees</u> |
|--|-----------------------|
| <input type="checkbox"/> Wage Increase                   | _____                 |
| <input type="checkbox"/> New Job Creation                | _____                 |
| <input type="checkbox"/> Promotion                       | _____                 |
| <input type="checkbox"/> Increase Job Security           | _____                 |
| <input type="checkbox"/> Additional Skills               | _____                 |
| <input type="checkbox"/> Industry Recognized Certificate | _____                 |
| <input type="checkbox"/> College Credits                 | _____                 |
| <input type="checkbox"/> Other _____                     |                       |

### **Expected Company Outcomes section: Check all that apply**

- Increase Customer Satisfaction
- Increase Productivity
- Increase Quality
- Increase Sales
- Other \_\_\_\_\_

**Budget and Budget Narrative**

**Grant Funds:** The amount requested should only include allowable activity taking place that will be reimbursed with grant funds. Grant funds cannot be used to purchase equipment, compensate employees while in training or pay for travel related expenses. The maximum request for these Express Grants is \$5,000.

**Grant Recipient Cost:** Grants will be entered into on a cost reimbursement basis. This means that the grant recipient must pay for the complete cost of the training and then request reimbursement of 50%. For example: If the total training cost is \$5,000, 50% (\$2,500) is reimbursable with grant funds. NOTE: Applicants may apply to receive Bonus Funding to support their training. See Section III for details.

**EXAMPLES OF ALLOWABLE AND NON-ALLOWABLE COSTS FOR TRAINING EXPENSES**

<b>Allowable Training Expenses</b>	<b>Non-Allowable Costs</b>
Tuition and training provider fees	Equipment including hardware and software
Training materials and supplies	Lost worker productivity
Software that is used 100% for training activities	Grant preparation or administrative costs
Cost of evaluating the training	Travel expenses, meeting space, lodging, food
	Wages while in training and fringe benefits cost
	Curriculum development
	In-house trainer wages and benefits

**A. Budget Detail**

Follow the budget format below. Each expense line item must reflect the 50/50 percent split between grant funds and the applicant's cost. Please note that final invoices are to be submitted within 30 days of the completion of training.

<b>Expense Item</b>	<b>Total Cost 100%</b>	<b>Grant Funds Requested 50%</b>	<b>Applicant's Cost 50%</b>
1.			
2.			
3.			
4.			

**B. Budget Narrative**

The budget narrative must correspond to the expense items listed in the budget and explain how the costs were determined. The budget narrative should be set up in the exact order as the program section and budget line items for easy reference. For each line item of the budget, provide a description below of how costs were determined. (Example: 1 trainer @ \$30 per hour for 60 hours of training = \$1,800.00)

### **SECTION III – BONUS FUNDING INCENTIVE**

The Governor’s Workforce Board is committed to helping Rhode Island’s youth obtain valuable work experiences that will prepare them for their futures – and we need your help! Applicants who are awarded an Express Grant for Incumbent Worker Training Program, and who offer one of the following work experiences to a youth referred by a YouthWORKS411 center, shall be eligible to receive up to \$2,500 for that youth experience to offset your Express Grant for Incumbent Worker Training Program costs. A total of up to \$50,000 will be awarded in Bonus Funding, with a maximum of up to \$2,500 per applicant (not to exceed the amount of the applicant’s Express Grant for Incumbent Worker Training Program award).

#### **Bonus Funds**

**\$2,500 per youth\***

#### **School Year Internship (unpaid internship/career exploration)**

- Minimum of five hours per week for thirteen weeks during the school year. May be after school or, in some cases, during the school day to meet the needs of the youth and company/organization.

#### **General provisions**

- Youth ages 14-24
- To provide career exploration and skill development for youth
- Should be related to the youth’s interests, abilities and career goal
- Must adhere to State and Federal Child Labor Laws
- Youth will be referred from your nearest YouthWORKS411 center
- Employer shall provide proper supervision, document activities, maintain signed timesheet/evaluation forms
- Employer shall provide overview of all aspects of your company and their specific job duties and responsibilities
- Companies are encouraged to have youth rotate among various departments within the organization

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#### **Application for Bonus Funding**

Name of Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person / Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Company/Organization Website: \_\_\_\_\_

<u>Proposed Activity</u>	<u># of youth</u>		<u>Total bonus funding*</u>
<input type="checkbox"/> School year internship	_____	@\$2,500 per youth	\$_____

\* Maximum bonus funding per applicant is \$2,500.

**Narrative:** What duties will the youth perform? Who will supervise the youth? What jobs and careers will the youth learn about? How will your company model good work behavior? (please limit to no more than two, double-spaced pages)

## YouthWorks411 – Rhode Island’s Youth Centers

The two local workforce boards operate youth centers around the state, offering services to help youth obtain skills they need for employment and connections to employment and training.



1. Pawtucket (2 locations)
2. Woonsocket
3. Wakefield
4. Charlestown
5. Westerly
6. Johnston
7. Providence (2 locations)
8. Warwick
9. East Providence
10. Bristol/Warren
11. Newport
12. West Warwick
13. Cranston
14. North Providence
15. North Kingstown

Services offered to youth at centers:

Academic Assessment	Tutoring	Interview Skills	Appropriate Workplace Attire
Vocational Interest Survey	Dropout Prevention	Internships	Professional & Ethical Behavior
Labor Market Information	GED Preparation	Resume Development	Health & Safety on the Job
Leadership Development	Career Information	Work Experiences	Conflict Resolution

We ask employers to provide a *meaningful* work experience in which youth perform work activities and:

- Learn about jobs and careers in that company and the occupational skills or trainings needed for those jobs
- Learn first-hand about the personal attributes needed to obtain a job and advance in employment
- Develop basic work habits

We also ask the employer to:

- Provide positive adult role models for youth
- Fill out a time sheet/ evaluation form
- Follow Youth Labor Laws (we will provide technical assistance with this)
- Sign a Worksite Agreement

A youth recommended for placement at your business will be:

- Pre-screened and matched in the areas of age, maturity, interest, abilities and type of work
- Interviewed and accepted or rejected by you
- Coached after placement by our staff whom you can contact directly with any questions or concern

**If your organization is awarded Bonus Funding through this RFP, your area Youth Center will contact you to attend an orientation where the program parameters will be explained. In addition, you will be given a list of eligible youth who, based on an assessment by Youth Center staff, have shown an interest/aptitude in your industry. You will have the opportunity to interview and select the youth who will be placed at your organization.**