



Grant Proposal Notification

GPN Number: 060-23
(Completed by Finance Department)

Date of Notification: 11/15/2023
(MM/DD/YYYY)

Parent Committee Agenda Date: 11/21/2023
(Completed by Finance Department) (MM/DD/YYYY)

Grant Application Due Date: 11/21/2023
(MM/DD/YYYY)

Name of Grant: FY24 Supplemental State Funding for LWIAs

Name of Grantor: IL Dept of Commerce & Economic Opportunity

Originating Entity: _____
(Name the entity from which the funding originates, if Grantor is a pass-thru entity)

County Department: Human Resources-Workforce Development Division

Department Contact: Lisa Schvach, Director or Workforce Devt. Div (955-2066)
(Name, Title, and Extension)

Parent Committee: Economic Development

Grant Amount Requested: \$ 65,164.37

Type of Grant: Formula
(Competitive, Continuation, Formula, Project, Direct Payment, Other – Please Specify)

Is this a new non-recurring Grant: Yes No

Source of Grant: Federal State Private Corporate

If Federal, provide CFDA: _____ If State, provide CSFA: 420-30-3299



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1. Justify the department's need for this grant.

The State of Illinois Fiscal Year 2024 budget includes \$5 million in General Revenue Funds for the Local Workforce Innovation Areas (LWIAs) to support workforce services provided in coordination with the Workforce Innovation and Opportunity Act (WIOA) funds. These funds will be used to support additional services as an extension of our Back to School/Back to Work initiative for parents who are returning to the workforce after a career break. Individuals in this category are often not eligible for WIOA funding.

2. Based on the County's Strategic Plan, which strategic imperative(s) correlate with funding opportunity. Provide a brief explanation.

Imperative 5: Foster continued growth of the DuPage Economy

5.1. Ensure that DuPage County residents have the competitive skills necessary to create and maintain a high quality workforce.

The grant will allow the DuPage County Workforce Development Division to provide assistance to residents looking to reenter the workforce after a career break/gap in employment history.

3. What is the period covered by the grant?

07/01/2023 to: 06/30/2024
(MM/DD/YYYY) (MM/DD/YYYY)

- 3.1. If period is unknown, estimate the year the project or project phase will begin and anticipated duration:

3.1.1. _____ and _____
(MM/YY) (Duration)

4. Will the County provide "seed" or startup funding to initiate grant project? (Yes or No)

No

- 4.1. If yes, please identify the Company-Accounting Unit used for the funding _____

5. If grant is awarded, how is funding received? (select one):

5.1. Prior to expenditure of costs (lump-sum reimbursement upfront)

5.2. After expenditure of costs (reimbursement-based)



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6. Does the grant allow for Personnel Costs? (Yes or No) Yes

6.1. If yes, what are the total projected salary and fringe benefit costs of personnel charging time to the grant for the entire term of the grant? Compute County-provided benefits at 40%.

6.1.1. Total salary \$26,326.88 Percentage covered by grant 16.67%

6.1.2. Total fringe benefits \$4,197.00 Percentage covered by grant 16.67%

6.1.3. Are any of the County-provided fringe benefits disallowed? (Yes or No): No

6.1.3.1. If yes, which ones are disallowed?

6.1.3.2. If the grant does not cover 100% of the personnel costs, from what Company-Accounting Unit will the deficit be paid?

Other WIOA grants under 5000-2840

6.2. Will receipt of this grant require the hiring of additional staff? (Yes or No): No

6.2.1. If yes, how many new positions will be created?

6.2.1.1. Full-time _____ Part-time _____ Temporary _____

6.2.1.2. Will the headcount of the new position(s) be placed in the grant accounting unit? _____
(Yes or No)

6.2.1.2.1. If no, in what Company-Accounting Unit will the headcount(s) be placed?

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6.3. Does the grant award require the positions to be retained beyond the grant term? (Yes or No) No

6.3.1. If yes, please answer the following:

6.3.1.1. How many years beyond the grant term?

6.3.1.2. What Company-Accounting Unit(s) will be used?

6.3.1.3. Total annual salary

6.3.1.4. Total annual fringe benefits

7. Does the grant allow for direct administrative costs? (Yes or No) No

7.1. If yes, please answer the following:

7.1.1. Total estimated direct administrative costs for project

7.1.2. Percentage of direct administrative costs covered by grant

7.1.3. What percentage of the grant total is the portion covered by the grant

8. What percentage of the grant funding is non-personnel cost / non-direct administrative cost?

9. Are matching funds required? (Yes or No): No

9.1. If yes, please answer the following:

9.1.1. What percentage of match funding is required by granting entity?

9.1.2. What is the dollar amount of the County's match?

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- 9.1.3. What Company-Accounting Unit(s) will provide the matching requirement? _____
10. What amount of funding is already allocated for the project? \$0.00
- 10.1. If allocated, in what Company-Accounting Unit are the funds located? _____
- 10.2. Will the project proceed if the funding opportunity is not awarded? (Yes or No): No
11. What is the total project cost (Grant Award + Match + Other Allocated Funding)? \$65,164.37