

DRAFT

Section B

Program Cost				
A. Item	B. Training	C. Placement *	E. Total	Definitions of Costs:
1. Assessment/Training	Enter costs		Enter amount from 1B here	<p>"Assessment/Training": instructor, tuition, training facility, assessment, etc.</p> <p>"Consumable" : books, tools, hard helmets, back brace, goggles</p> <p>"Support Services" : transportation & childcare</p> <p>"Board Direct" : data entry, staff, printing, communications</p> <p>"Administration" : indirect program costs</p>
2. Consumable Training Materials	Enter costs		Enter amount from 2B here	
3. Board Direct Program Costs (Training Only)	Enter costs		Enter amount from 3B here	
4. SUBTOTAL TRAINING COSTS	Add Lines 1B through 3B		Enter amount from 4B here	
5. Support Services Costs **	Enter costs		Enter amount from 5B here	
6. Board Direct Program Costs (Placements Only)		Enter costs	Enter amount from 6C here	
7. Board Administrative Costs ***	Enter costs		Enter amount from 7B here	
8. TOTAL COST OF TRAINING PROGRAM	Add Lines 4B, 5B and 7B	Enter amount from 6C here	Add Lines 1E through 7E	
9. AVERAGE COST PER PARTICIPANT	Divide Line 8B above by the Total Number of Participants to be Trained referenced in the Program Information section above	Divide Line 8C above by the Total Number of Participants to be Placed referenced in the Program Information section above		

* Do not enter placement costs for advanced-level training; placement costs are only applicable to entry-level training.
 ** Costs for support services must be minimal. If too high, such costs may be reduced or denied. Justification must be supplied below in 3
 *** Administrative costs should only reflect allocated overhead or administrative costs which must not exceed 10% of the funds award

SECTION B continued

Justification of Need for Program #1

The information below is necessary as a part of the justification of need for funds for the Florida reBuilds Program. Please provide the following in the space below: **a)** a description of how the training will be provided, **b)** indicate whether the proposed training is or is not available in your area by other public/private training providers, **c)** your outreach efforts to construction related businesses and associations, **d)** a thorough explanation of the amount of funds required, and **e)** explanation and justification for any support services costs included in the budget detail above. Also, please attach any additional support documentation that is required.

a) _____

b) _____

c) _____

d) _____

e) _____

For WFI Use Only

WFI Approved By:

Date:

WFI Disapproved By:

Date:

SECTION C - For WFI Use Only

Total Number of Individuals Planned for Entry-Level Training

Total Number of Individuals Planned for Placement

Total Number of Individuals Planned for Advanced-Level Training

Notes:
