PROPOSAL COVER SHEET

EXHIBIT A

(Lead) Organization Name: _____

Address: _____

_____

Contact Person and Title: _____

_____

Telephone Number: _____ **Fax Number:** _____

Email Address(es): _____

Indicate if Proposal is for: ☐OSY ☐ISY

Indicate Region(s): ☐Western ☐Northern ☐Coastal ☐Southern

Specify breakdown of funds and enrollments.

	Western	Northern	Coastal	Southern	TOTALS
Funds requested					
Estimated total # of youth to be served, including:					
a) Number of new enrollments					
b) Estimated # of carry-ins from table on p.7 of this RFP					
Estimated cost per participant (total funds requested divided by total # of youth to be served)					

Federal ID #:_____ Certifying Agency:_____

By signing this proposal, the Corporate Officer or Public Officer certifies that no representative of the corporation has exerted any undue influence on the procurement process, violated any federal or state procurement, conflict of interests or ethics law in seeking funding for this proposal.

Corporate/Public Officer Signature: _____

Print/Type Name and Title: _____

Date: _____

Check all applicable:

☐ Corporation ☐ Sole Proprietorship ☐ Partnership ☐ Other _____
☐ For-Profit ☐ State Agency ☐ Other Public Agency (Specify) _____
☐ Labor Organization ☐ Community-Based Organization ☐ Not-for-Profit ☐ Business Organization

EXHIBIT B

ASSURANCES

I recognize that I must give assurance for each item below. If I cannot, this proposal will be automatically rejected. The assurances are:

1. I am authorized by my Board of Directors, Trustees, other legally qualified officer, or as the owner of this agency or business to submit this proposal on behalf of the "Proposer."

2. The submitted proposal shall remain valid for a period of at least 120 calendar days.

3. Proposer is not currently on any Federal, State of California, or local Debarment List.

4. Proposer will provide records to show fiscal solvency, if needed.

5. Proposer has/will have all of the fiscal control and accounting procedures needed to ensure that WIA funds will be used as required by law and contract.

6. Proposer has additional funding sources and will not be dependent on WIA funds alone to carry out the proposed program(s).

7. Proposer will meet all applicable federal, state, and local compliance requirements. These include, but are not limited to:
   - Meeting County of Orange Insurance requirements (see Attachment Two herein)
   - Ensuring that records accurately reflect actual performance
   - Maintaining record confidentiality, as required
   - Reporting financial, participant, and performance data, as required
   - Complying with Federal and State non-discrimination provisions
   - Meeting requirements of Section 504 of the *Rehabilitation Act of 1973*
   - Meeting all applicable labor law, including Child Labor Law standards
   - Meeting all child support enforcement certification requirements
   - Meeting all lobbying certification and disclosure of lobbying activities requirements

8. Proposer will not:
   - Place a youth in a position that will displace a current employee.
   - Use WIA money to assist, promote, or deter union organizing.
   - Use funds to employ or train of persons in sectarian activities.
   - Use funds for youth in the construction, operation, or maintenance of any part of a facility to be used for sectarian instruction or religious worship.
   - Use WIA funds for activities that would interfere with or replace regular academic requirements for eligible youth who are not dropouts.

I hereby assure that all of the above are true.

_____	_____	_____
Name	Title	Date

EXHIBIT B-1

PY 06-07 WIA YOUTH
Targeted Recruitment/Population

Provider: _____

On the chart below, please

- Enter the total number of youth to be enrolled during PY 06-07:_____
- Indicate the number in each barrier category that you will target for the year and the specific outreach strategies.

Note: Some youth may have multiple barriers and overlap in several categories. Therefore, the tally may be greater than the actual total number of youth proposed to be enrolled above.

TARGET GROUP	TOTAL	% of Total Enrollments from above	Outreach Strategies
Out of School			
High School Drop-Out			
Foster Youth			
Emancipated Youth			
Homeless/Runaway			
Offender			
Children of Incarcerated Parent(s)			
Pregnant or Parenting Youth			
Substance Abuse			
Basic Skills Deficient			
Gang Affiliated			
Other High Risk			

Note: Lack of compliance with final negotiated recruitment plan may constitute grounds for de-obligation of funds.

EXHIBIT B-2

PY 06-07 WIA YOUTH ACTIVITY MATRIX

Activity	Description	Duration of Activity		Partners Involved	Funding Source
		Hours	Months		
1. Tutoring/Drop-out prevention strategies					
2. Alternative/Secondary School Services					
3. Summer Employment					
Paid & Unpaid Work Experience					
Internships					
Job Shadowing					
4. Work Activities					
Paid & Unpaid Work Experience					
Internships					
Job Shadowing					
5. Occupational Skills Training					
6. Leadership Development					
7. Supportive Services		N/A	N/A		
8. Adult Mentoring					
9. Follow-up					
10. Comprehensive Guidance and Counseling					

EXHIBIT C

PY 06-07 WIA YOUTH PERFORMANCE MATRIX

Provider: _____

Region: _____

NUMBER OF YOUTH TO BE ENROLLED/SERVED	Carry-Ins PY 05-06	1st Qt 7/1-9/30	2nd Qt 10/1-12/31	3rd Qt 1/1-3/31	4th Qt 4/1-6/30	TOTAL NEW ENR	TOTAL SERVED
Younger Youth (ages 14-15)							
Younger Youth (ages 16-18)							
Total Younger Youth							
Older Youth (ages 19-21)							
TOTALS							

PERFORMANCE MEASURES
YOUNGER YOUTH (AGES 14-18)
Skill Attainment Rate - At least **84%** of all youth must attain a basic, occupational or work readiness skills goal during program participation **(Exiters 4/1/05-3/31/06)**
Diploma or Equivalent Rate - At least **66%** of all youth who register without a high school diploma or equivalent must attain a diploma or equivalent by 1st quarter after exit **(Exiters 4/1/05-3/31/06)**
Retention Rate - At least **63%** of all youth who exit from 10/1/02 through 9/30/03 must be found in one of the following activities in the 3rd. Qt. after exit: postsecondary education, advanced training, employment, military service, or qualified apprenticeship **(Exiters 4/1/04-3/31/05)**
OLDER YOUTH (AGES 19-21)
Entered Employment Rate – At least **72%** of all youth who are *not* employed at registration and do *not* move onto postsecondary education/advanced training must be employed in the 1st quarter after exit **(Exiters 10/1/04-9/30/05)**
Employment Retention Rate – At least **80%** of all youth who are *employed* in the 1st quarter after exit *and* do not move onto post-secondary education/advanced training must be retained in employment in the 3rd. quarter after exit **(Exiters 4/1/04-3/31/05)**
Earnings Gain – Youth who are *employed* in the 1st quarter after exit *and* do not move onto postsecondary education/advanced training must show an **average earnings gain of $3,700** in the 3rd quarter after exit **(Exiters 4/1/04-3/31/05)**
Employment and Credential Attainment Rate – At least **38%** of youth who are in employment/ post-secondary education/advanced training by the end of the 1st quarter after exit must receive a credential by the end of the 3rd quarter after exit **(Exiters 10/1/04-9/30/05)**
COMMON YOUTH MEASURES
Placement in Employment or Education - Of those who are not in post-secondary education, employment, or the military at the date of participation: [# of participants who are in employment or the military or enrolled in post-secondary education and/or advanced training/occupational skills training in the 1st quarter after the exit quarter] *divided by* [# of participants who exit during the quarter]
Attainment of a Degree or Certificate – Of those enrolled in education at the date of participation or at any point during the program: [# of participants who attain a diploma, GED or certificate by the end of the 3rd quarter after the exit quarter] *divided by* [# of participants who exit during the quarter]
Literacy and Numeracy Gains – Of those out-of-school youth who are basic skills deficient: [# of participants who increase one or more educational functioning levels] *divided by* [# of participants who have completed a year in the program (i.e., one year from the date of program participation) plus (+) the # of participants who exit before completing a year in the program]

Notes: 1) The number of active, carry-in participants transitioning into PY 06-07 from PY 05-06 will be estimated at time of contract negotiations. 2) Lack of compliance with final negotiated performance plan may constitute grounds for de-obligation of funds.

PROVIDER NAME:_____

REGION:_____

WIA YOUTH BUDGET SUMMARY: 7/1/06-6/30/07

	PROGRAM COSTS	TOTAL
1.	Salaries	
2.	Benefits	
3.	Operations	
4.	Consultant/Subcontract	
5.	Employer Reimbursement (OJT)	
6.	Miscellaneous Client Fees	
7.	Student Supplies	
8.	Participant Wages	
9.	Equipment: $5,000 or Over	
10.	Equipment: Computer Related - $1,000 - 4,999	
11.	Equipment: Non Computer - $1,000 - 4,999	
12.	Indirect (not to exceed 5% of total budget)	
	TOTAL	
	ADMINISTRATION (ALLOWABLE ONLY FOR OCWIB ONE-STOP OPERATORS AND NA FOR ALL OTHERS)	
	GRAND TOTAL	

Note: If Contractor's expenditures fall below 20% of approved expenditures for any cumulative period, Contractor may be subject to de-obligation of funds.

PROVIDER NAME:_____

REGION:_____

WIA BUDGET DETAIL: 7/1/06-6/30/07

PROGRAM COSTS	TOTAL $
SALARIES: (Include titles and FTEs)	
SUBTOTAL - SALARIES	
BENEFITS	
SUBTOTAL – BENEFITS	
OPERATIONS (Include facility lease and utilities, supplies, mileage, postage, equipment, etc. as applicable)	
SUBTOTAL - OPERATIONS	
MISCELLANEOUS CLIENT FEES (Include supportive services, incentives, etc. as applicable)	
SUBTOTAL - MISC CLIENT FEES	
STUDENT SUPPLIES	
PARTICIPANT WAGES __ Youth X average of ___ hrs x $___ Work experience and/or internships Participant benefits:	
SUBTOTAL - PARTICIPANT WAGES	
EQUIPMENT: $5,000 and OVER	
EQUIP: COMPUTER RELATED ($1,000-4,999)	
EQUIP: NON COMPUTER ($1,000-4,999)	
INDIRECT (not to exceed 5%)	
TOTAL	
ADMINISTRATION **(ALLOWABLE ONLY FOR OCWIB ONE-STOP OPERATORS)**	
GRAND TOTAL	

EXHIBIT D-2

PROVIDER NAME:_____

REGION:_____

WIA YOUTH EXPENDITURE PLAN: 7/1/06-6/30/07

COST CATEGORIES	Qtr 1 7/1/06-9/30/06	Qtr 2 10/1/06-12/31/06	Qtr 3 1/1/07-3/31/07	Qtr 4 4/1/07-6/30/07	Total
PROGRAM					
1. Salaries					
2. Benefits					
3. Operations					
4. Consultant/Subcontract					
5. Employer Reimbursement (OJT)					
6. Miscellaneous Client Fees					
7. Student Supplies/Supportive Services					
8. Participant Wages					
9. Equipment: $5,000 or Over					
10. Equipment: Computer Related - $1,000 -$4,999					
11. Equipment: Non Computer - $1,000 - $4,999					
12. Indirect (not to exceed 5%)					
TOTAL					
ADMINISTRATION (Allowable only for OCWIB One Stop Operators/NA for all others)					
GRAND TOTAL					

Note: If Contractor's expenditures fall below 20% of approved expenditures for any cumulative period, Contractor may be subject to de-obligation of funds.

EXHIBIT D-3

PROVIDER NAME:_____

REGION:_____

WIA PERSONNEL BREAKDOWN: 7/1/06-6/30/07

			PERCENT OF TIME SPENT ON WIA YOUTH		
Name	**Position Title***	**Full Salary**	**WIA Youth Full Time Equivalent**	**WIA Youth Salary Portion**	**Total $**
		0		0	0
					0

*Job Descriptions for each position title must be attached as required in Response Section II-2.

EXHIBIT D-4

WIA YOUTH PARTNERSHIPS

PROVIDER:_____

ORGANIZATION	DESCRIPTION OF ORGANIZATION	MONTHLY CASH	MONTHLY VALUE OF IN-KIND	DESCRIPTION OF IN-KIND

Note: Entries must match Response Section A-5 with corresponding letters of commitment/MOAs submitted.