DEPARTMENT OF EMPLOYMENT AND ECONOMIC DEVELOPMENT
Vocational Rehabilitation Services – Extended Employment Program
332 Minnesota Street, Suite E200, St. Paul, MN 55101-1351

SFY 2014 APPLICATION FOR FUNDING OF CERTIFIED EXTENDED EMPLOYMENT PROVIDER

NAME OF APPLICANT EE PROVIDER	FUNDING PERIOD:
Stephen Kohn, Executive Director	**7/1/13 - 6/30/14**
EE PROVIDER'S ADDRESS (Street, City, State, ZIP) Service Enterprises 515 W. Bridge Street, PO Box 248 Redwood Falls, MN 56283	

		Community Support Fund	**Center Based Fund**
For VRS Use Only	Certification Status:	☐ Certified ☐ Pending ☐ Requested	☐ Certified ☐ Pending ☐ Requested
SFY14 Current Contract ALLOCATION		$89,034	$
SFY14 New and Expanded ALLOCATION		$	
SFY14 Funding Request TOTAL		$89,034	$

APPLICANT ATTESTATIONS

We, the undersigned, acknowledge the acceptance of this application is contingent upon the Department's certification of the applicant's EE programs, pursuant to M. Rules, 3300.2010., subp. 2; and

We certify the information supplied in this application and supporting documents to be true and accurate; allocated funds will be used to provide services pursuant to Minnesota Rules, 3300.2005-3300.2055; and we shall ensure compliance with all contract requirements and all applicable statutes, rules and regulations.

SIGNATURE OF THE EXECUTIVE DIRECTOR OF THE EE PROVIDER ORGANIZATION	DATE