Grant Application Guide & Forms

Minnesota department of employment and economic development

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**Minnesota Job skills partnership**

Low Income Worker Training Program

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# MINNESOTA JOB SKILLS PARTNERSHIP BACKGROUND

Created by the 1983 Legislature, the Minnesota Job Skills Partnership (MJSP) is a state agency administered by the Department of Employment and Economic Development (DEED) and governed by a 12- member board of directors who represent Minnesota businesses, labor, government, and educational institutions. MJSP administers three grant programs. The original Partnership grant program was developed in 1983 and can be used for training of both new and existing employees of participating businesses. The second program, called Pathways, was created by the 1997 Legislature to provide training for individuals transitioning from public assistance to employment with participating businesses. The third grant program, called the Low Income Worker Training Program, was created in 2001 to help individuals with incomes at or below 200% of the federal poverty level receive training to acquire additional skills in order to move up the career ladder to higher paying jobs and economic self-sufficiency.

In order to maintain a strong economic base, Minnesota must provide more trained individuals to fill the employment demands of the industrial and business segment of the economy. Business and education often function independently. Educational institutions produce trainees skilled in one field, while business and industry often need a workforce skilled in quite a different area. The result of this mismatch has been that neither our businesses, nor our training and educational institutions, nor our labor force have been fully served.

The Minnesota Job Skills Partnership is mandated to act as a catalyst between Minnesota's post-secondary educational or non-profit training institutions and business/industry for the purpose of designing and implementing training programs. The training programs are expected to meet current and future employer requirements through the training and placement of workers in positions that offer trainees long-term professional growth and economic opportunity.

In addition, direct and continual involvement with the private sector in the design and implementation of MJSP funded training projects is expected to enhance and expand the expertise and capacity of the state's educational institutions.

The long-term goal of MJSP training programs is to help create an environment of cooperation between business/industry and Minnesota's post-secondary educational or non-profit training institutions. It is anticipated that the partnerships formed through MJSP funded training programs will continue to grow and expand after MJSP funding has ended.

# LOW INCOME WORKER TRAINING PROGRAM GUIDELINES

## Program Purpose

The purpose of the Low Income Worker Training Program is to help individuals with incomes at or below 200% of the federal poverty guidelines, who may be unemployed or working in low wage jobs, receive training to acquire additional skills in order to move up the career ladder to higher paying jobs and economic self-sufficiency.

The program is designed to provide grants to eligible applicants, who then cover the cost of training for eligible individuals. The training initiatives funded by the Low Income Worker Training Program are intended to be flexible and responsive in order to maximize the ability of funded programs to adapt to changes in economic and business conditions. The goal of the MJSP is to target training for full-time employment in the growth sectors of the state's economy.

## Eligibility Criteria

Eligible applicants include Minnesota public, private, or non-profit entities that provide employment services to low-income individuals or partnerships of two or more of these entities. Targeted trainees may only include individuals who are Minnesota residents and have incomes at or below 200% of the federal poverty guidelines. The current federal poverty guidelines can be found at the U.S. Department of Health and Human Services website at <http://aspe.hhs.gov/poverty>.

The Board looks for projects that provide trainees with durable skills for job advancement and wage increases that provide for livable wage opportunities, while at the same time maintaining a low cost per trainee.

The Board will consider applications from individual and/or partnerships of two or more eligible applicants and may award grants to applications that utilize more than one training program to provide job-specific skills training and education within a project.

In order to meet Board certification requirements, the applicant must indicate the specific training program(s) that will be used to provide the training and provide detailed information on the training program(s) within the application.

Applicants must be able to work cooperatively with appropriate service agencies and organizations that have access to and knowledge of the target populations. These may include, but are not limited to, one or more of the following: the Department of Employment and Economic Development, the Department of Human Services, local CareerForce centers, local workforce councils, and other organizations serving particular client groups identified in the application.

## MJSP Funding Priorities

MJSP recognizes the importance of reducing disparities and is committed to encouraging diversity, equity, and inclusion in the workplace. Additional consideration is given to projects that will serve adults meeting the above income criteria and those who also traditionally face barriers to successful employment including but not limited to:

* Individuals who identify with minority ethnic/race populations;
* Individuals with disabilities;
* Individuals returning to work from public assistance;
* Older workers;
* Veterans; and/or
* Recently unemployed or individuals who are long-term unemployed.

## Use of Funds

Grants of up to $200,000 may be awarded to eligible organizations. Eligible organizations may use grant funds to provide eligible trainees with Board approved, job-specific skills training and education for the purpose of increasing their economic standing. Grant funds may also be used for training-related materials and supplies and for training-related certification or test fees. When a need is adequately demonstrated, up to 10% of the direct training costs may be requested for operating costs directly related to project coordination. Allowable operating costs include costs associated with recruitment, screening and assessments, and referral and placement of program participants, along with costs for completing program reporting requirements.

Grant funds are not intended to be used for work-readiness type training. Some examples of work-readiness training include topics on filling out job applications, resume preparation and job interview techniques. While we recognize that several training programs include work-readiness type training components or modules, it is our expectation that other funding sources will be identified to cover the costs associated with those training components.

Grant funds also are not intended for the development of new or customized curriculum but rather to cover the costs for individuals to participate in existing courses and training programs.

Grant funds may not be used for transportation, childcare or other support services. Grant funds also may not be used to pay trainee wages.

All costs associated with the activities of a Low Income Worker Training grant must be detailed. Specifically, the itemized costs of the training for each individual served through a grant must be provided.

## Reporting Requirements

Grant recipients will be required to submit reports on a quarterly basis, including a Progress Report which provides a narrative description of how the project is progressing and information on participants served; a Financial Report outlining the costs incurred during the report period; and a Reimbursement Payment Request outlining the amount to be reimbursed by MJSP. In addition, the grantee must submit an Applicant Statement of Income for each participant to confirm income eligibility and complete a Final Evaluation Report at the end of the project to report on the outcomes and the effectiveness of the program.

Additional information regarding reporting requirements can be found in the Grantee Handbook available on our website.

# GRANT APPLICATION GUIDELINES

## General Information

Applicants are expected to comply with the general assurances and certifications required by the state of Minnesota as well as any special requirements included in the grant document.

The solicitation of a proposal does not commit the Minnesota Job Skills Partnership Board to award a grant, to pay the costs incurred in the preparation of a proposal, to procure or contract for services or supplies, or to the issuance of a written grant agreement.

All requests for funding must be submitted as formal grant applications to the Minnesota Job Skills Partnership.

Any single Low Income Worker Training Program grant to any one organization shall not exceed $200,000.

While some flexibility in funded programs is allowed in order to be responsive to changes in economic and business conditions, changes to the approved training plan should be kept minimal. It should also be noted that the project must not deviate from the Board approved training plan outlined in the application and must only use training providers included in the application and approved by the MJSP Board, unless changes are approved in writing by the MJSP staff.

## Award Process

Funding will be allocated through a competitive process with review by staff and final funding decisions by the MJSP Board in accordance with the guidelines adopted by the Board. The Board retains the right to accept or reject all proposals, to negotiate with selected bidders and to require revisions to applications as agreed to during negotiations. The awarding of a grant to successful bidders is contingent upon satisfactory negotiations and signing of the grant contract agreement. Grant funds are provided on a reimbursement basis.

## Availability of Funding

Funding of projects is contingent upon legislative and/or Board appropriations. Information regarding the availability of the program may be sought by contacting the MJSP at 651-259-7514.

## Application Timetables

Current Requests for Proposals can be found on DEED’s website at: <https://mn.gov/deed/about/contracts/open-rfp.jsp>. Additional information regarding the timetables for submission of proposals/grant applications may be obtained by visiting our website at: <https://mn.gov/deed/business/financing-business/training-grant/mjsp/> (under the Meeting Schedule tab) or by contacting MJSP at 651-259-7514.

To be considered for funding at upcoming board meetings, applications must be submitted by the corresponding application due dates posted in the current Request for Proposal and/or on our website. Applications are generally due six weeks prior to each board meeting to provide staff time to evaluate applications and make recommendations to the board.

## Technical Assistance

Technical assistance is available for interpreting instructions or preparing applications. Contact MJSP at 651-259-7514 or [deed.mjsp@state.mn.us](mailto:deed.mjsp@state.mn.us).

## Application Format

All eligible organizations and institutions interested in submitting a grant application must adhere to the following conditions:

* Applications must be typewritten and have numbered pages.
* Applications must be submitted using the format outlined in the following grant application instructions or the grant application forms provided on our website at <https://mn.gov/deed/business/financing-business/training-grant/>.
* Applications must be submitted via email to the Department of Employment and Economic Development, Minnesota Job Skills Partnership office at [deed.mjsp@state.mn.us](mailto:deed.mjsp@state.mn.us) as one file, including attachments, in a PDF format.
* The Conflict of Interest form must be signed and submitted with the application.
* All applicants must complete the form included in the grant application certifying that no current principles of the organization have been convicted of a felony financial crime in the last 10 years.
* For-profit and non-profit applicants must complete the Evidence of Good Standing form included in the grant application.
* Non-profit grant applicants must include their organization’s most recent Form 990 or Form 990-EZ filed with the IRS, most recent audited financial statement of a charitable organization if applicable under [Minn. Stat. §309.53](https://www.revisor.mn.gov/statutes/cite/309.53), or the most recent board-reviewed financial statements, description of internal controls over business expenditures and outcome of grant funds, and evidence of exemption.
* For-profit grant applicants must include their organization’s most recent federal and state tax returns, current financial statements, certification the business is not under bankruptcy proceedings, and disclosure of any liens on assets.
* Applications must be received by the deadline posted in the Request for Proposal to be eligible for consideration. No late applications will be considered. If you do not receive an email confirming the receipt of your application within 24 hours of submission, contact MJSP immediately at 651-259-7514. In the event of technical issues or delays, an exception may be considered upon MJSP’s receipt of sufficient evidence that an attempt was made to submit the application to the correct email address by the application deadline and provided MJSP is notified within 24 hours of the application deadline that a confirmation email was not received.

## Review Guidelines

Applications are scored based on the following criteria:

* **Project Design** (40 points) – Used to evaluate participants that will be served, the training to be provided, and whether the program will maximize training and employment outcomes. Points are based on:
  + Expected completion rates
  + Expected placement rates
  + Employment retention strategies
  + Labor market information demonstrates demand for workers with the skills being provided
  + Training will result in livable wages, increased wages and/or wages above 200% of poverty level
  + Training is for an occupation with opportunities for advancement/defined career path
  + Proposal describes effort to recruit appropriate target populations
  + Applicant has appropriate screening plan for assessing participant interests, level of work experience, education, and skill competencies prior to enrollment to ensure that participants are a good match for the program
* **Organizational Capacity** (35 points) – Used to evaluate the organization’s past experience and ability to effectively manage a grant. Points are based on:
  + Applicant is experienced in providing employment services to low-income individuals.
  + Applicant’s past experience will benefit any special populations identified in proposal.
  + Applicant demonstrates capacity to serve the proposed number of participants.
  + Applicant demonstrates favorable outcomes in the following areas:
    - Participant completion rates
    - Participant placement rates in unsubsidized employment
    - Participant retention rates in employment for at least two quarters following the quarter during which they completed
    - Increased earnings for program participants
    - Percent of program participants achieving industry-recognized credentials or certifications.
  + Applicant demonstrates appropriate staffing plan, including the responsibilities associated with each position involved in project
  + Applicant has experience using Workforce One or has identified an individual prepared to learn these systems.
* **Partnerships** (20 points) – Used to evaluate the collaborative efforts of the applicant and the development of partnership to ensure participant success. Points are based on:
  + Applicant demonstrates leveraging of other resources
  + Applicant identifies meaningful partnerships and provides information on the roles, responsibilities and commitments of each partner.
  + Applicant demonstrates an effective alliance with a business partners
  + Applicant is partnering with an appropriate training provider
  + Application demonstrates that the training provider has a good track record; and
    - Training provider is accredited; and, or
    - Training provider is a well-established, reputable organization
* **Budget** (5 points) – Used to evaluate budget and project costs. Points are based on:
  + Administrative costs do not exceed 10% of the budget;
  + Direct training costs are appropriate for proposed training

## Public Data

Per Minn. Stat. § [13.599](https://www.revisor.mn.gov/statutes/?id=13.599), names and addresses of grant applicants, and amount requested will be public data once proposal responses are opened. All remaining data in the grant application and all data created or maintained by the DEED as part of the evaluation process (except trade secret data as defined and classified in §[13.37](https://www.revisor.mn.gov/statutes/?id=13.37)) will be public data after the evaluation process is completed (for the purposes of this grant, data will be considered public when grant contract agreements have been fully executed).

## Other State and Federal Requirements

All organizations receiving MJSP grants must also comply with all state and federal requirements including, but not limited to Worker’s Compensation, Affirmative Action, Data Privacy, Equal Employment Opportunity, The Americans with Disabilities Act (ADA), Voter Registration, and Unemployment Insurance.

# GRANT APPLICATION INSTRUCTIONS

Following is a brief description of each section contained in this application followed by the actual forms that are to be completed.

## Proposal Cover Page

Provide the name, address and contact information for the Applicant Agency and Training Provider(s). This information must be completed for each Training Provider. An additional page may be attached or inserted behind the Cover Page for requests involving more than one Training Provider. The cover page also includes general information such as the start and end date, planned number of trainees and placements, average MJSP cost per trainee, total grant amount requested and the occupations for which training is being provided. The Terms and Conditions section of the cover page is to be reviewed and signed by the individual that is authorized to commit the applicant agency to the project.

## Section A. Applicant Agency

Provide a brief description of the applicant agency. The description must include information on the organization’s history of performing the work that will be provided through the project. This should include describing current staffing, current budget, and the organization’s experience working with the targeted populations, providing support services and employment services, and providing training programs.

This section must also include information regarding the agency’s most current actual program performance using the table provided. For this table, please provide data for programs or services provided that are most relevant for the Low Income Worker Training Program. For example, if available, provide data for programs provided that specifically served low-income populations and included training. Please provide a narrative description of the data provided that includes any additional relevant information such as retention rates and increases in participant’s earnings.

In this section, also describe staff responsibilities and any experience the agency has in managing state or federal grants and working with the Workforce One database.

## Section B. Training Provider

Provide a brief description of the Training Provider(s).

## Section C. Linkage Organization(s)

Describe partnerships with businesses or other organizations that will be participating in the project. This would include any entity providing general support to the project such as serving on an advisory committee, providing internships, participating in job fairs or providing support services. Provide the name, address and contact information for any Linkage Organizations participating in the project and a description of the services the organization will be contributing to the project.

## **Section D. Curriculum/Work Statement**

This section includes both a narrative description of the proposed training program and the courses to be provided and the completion of the provided table which outlines the Course Titles or Training Topics to be used in the proposed training project and the related details for each, including any certifications or credentialing offered, training provider, targeted occupations and starting wages. The narrative portion must also include a description of participant screening and assessments, support services to be provided, placement activities and retention strategies.

## Section E. Targeted Occupations and Labor Market Information

The narrative portion of this section should demonstrate a demand in the labor market for the type of skills to be provided through the proposed training. You should also provide information related to wage progression and opportunities for advancement. When making recommendations for funding, MJSP staff will take into consideration employment projections and labor market data provided by the MN Department of Employment and Economic Development (DEED). You must complete the provided “Targeted Occupations” and “Career Ladder” tables using data specific to the region(s) your organization serves and the specific occupations for which training is being provided. The data needed to complete these tables can be found in the Occupations in Demand report (<http://mn.gov/deed/data/data-tools/oid/>) and the Job Vacancy Survey (<http://mn.gov/deed/data/data-tools/job-vacancy/>) located on the DEED website. The Number of Vacancies column refers to current vacancies, which is found on the Job Vacancy Survey. Median Wage Offer is also found on the Job Vacancy Survey and is reflected as an hourly rate. This is different from median wage in that it more closely reflects an expected starting wage.

If you believe the employment outlook or other labor market data on these sites are inaccurate for the occupation(s) in which you are proposing training, you should provide documentation or information to backup your assertion. For example, if you have identified specific businesses in your area that have identified an immediate need that this program will address, that information should be provided here and letters from the businesses should be provided.

## Section F. Target Population Characteristics

Indicate the number of trainees that are employed, unemployed, minorities, returning to work from public assistance, older workers, veterans, and that have disabilities. Note: eligible trainees include only individuals who have incomes at or below 200 percent of the Federal poverty guidelines.

## Section G. Expected Completion and Placement Rates

This section must include information regarding the agency’s expected program completion and placement rates using the table provided.

## Section H. Budget

MJSP requires a detailed budget breakdown that describes and differentiates between the cost of the different course(s) or training activities offered through the project, the total number of trainees to take each course or training activity, and the total cost for each course or activity.

## Exhibit A. Conflict of Interest Disclosure

The grant applicant must complete the Conflict of Interest Disclosure form that is included in the application forms. State grant policy requires that steps and procedures are in place to prevent individual and organizational conflicts of interest, both in reference to applicants and reviewers per [Minn. Stat.§16B.98 Subd. 2-3](https://www.revisor.mn.gov/statutes/?id=16B.98) and the Conflict of Interest Policy for State Grant-Making 08-01, which can be found on the [Office of Grants Management website](https://mn.gov/admin/government/grants/policies-statutes-forms/) under Current Policies. Organizational conflicts of interest occur when:

* A grantee or applicant is unable or potentially unable to render impartial assistance or advice to the Department due to competing duties or loyalties.
* A grantee’s or applicant’s objectivity in carrying out the grant is or might be otherwise impaired due to competing duties or loyalties

In cases where a conflict of interest is in question or disclosed, the applicants or grantees will be notified and actions may be pursued, including but not limited to, revising the grant work plan or grantee duties to mitigate the risk, requesting the grant applicant to submit an organizational conflict of interest mitigation plan, disqualification from eligibility for the grant award, amending the grant, or termination of the grant contract agreement.

## Exhibit B. Certification of No Conviction of Felony Financial Crime by a Principal

Minn. Stat. §16B.981 Subd. 2 (6) requires that no current principals of a grantee have been convicted of a felony financial crime in the last 10 years. A principal is defined as a public official, a board member, or staff (paid or volunteer) with the authority to access funds provided by this grant opportunity or to determine how those funds are used.

To comply with this requirement, grant applicants must sign this form certifying that no current principals of a grantee have been convicted of a felony financial crime in the last 10 years and attach a copy of an organizational chart or list of principals.

## Exhibit C. Required Nonprofit Grantee Documents as Applicable

All grantees as defined in [Minn. Stat. §16B.981](https://www.revisor.mn.gov/statutes/2023/cite/16B.981) Subd. 1 (c) applying for grants in the state of Minnesota must undergo a financial and capacity review prior to a grant award of $50,000 and higher.

To comply with this requirement, grant applicants that are nonprofit entities must complete this form and submit a copy of the organization’s Form 990 or 990EZ, audited financial statements, or board-reviewed financial statements, as applicable.

## Exhibit D. For-Profit Required Documents, Lien Disclosure, and Certification

All grantees as defined in [Minn. Stat. §16B.981](https://www.revisor.mn.gov/statutes/2023/cite/16B.981) Subd. 1 (c) applying for grants in the state of Minnesota must undergo a financial and capacity review prior to a grant award of $50,000 and higher.

To comply with this requirement, grant applicants that are for-profit entities must complete this form and submit a copy of the organization’s most recent state and federal tax returns and financial statements.

# GRANT APPLICATION FORMS

Following are the grant application forms to be completed and submitted to MJSP.

**Minnesota Job Skills Partnership**

**Low Income Worker Training Program**

**Grant Application Cover Page**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **General Information** | | | | | | | |
| **Applicant Agency** | | | | **Training Provider** | | | |
| Name: |  | | | Name: |  | | |
| Address: |  | | | Address: |  | | |
|  |  | | |  |  | | |
| City: |  | | | City: |  | | |
| State: |  | Zip: |  | State: |  | Zip: |  |
| Contact: |  | | | Contact: |  | | |
| Title: |  | | | Title: |  | | |
| Phone: |  | | | Phone: |  | | |
| Fax: |  | | | Fax: |  | | |
| E-Mail: |  | | | E-Mail: |  | | |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **General Program Information** | | | | | | | |
| Project Period: |  | | To: |  | Number of Trainees: | |  |
| Avg. MJSP Cost Per Trainee: | |  | | | Expected Placement: | Number: |  |
| Total MJSP Funds Requested: | |  | | | Percent: |  |
| Occupation(s) to be Trained For: | |  | | | | | |

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| --- | --- | --- | --- | --- |
| **Terms and Conditions** | | | | |
| **Data Privacy Acknowledgement:**  Tennessen Warning Notice: per MN Statutes 13.04, Subd.2, this data is being requested from you to determine if you are eligible for an award under the MN Job Skills Partnership program. You are not required to provide the requested information, but failure to do so may result in DEED’s inability to determine your eligibility for an award.  Data Privacy Notice: per MN Statutes 13.599, Subd. 3, responses submitted by a grantee are private or nonpublic until the responses are opened. Once the responses are opened, the name and address of the grantee and the amount requested is public. All other data in a response is private or nonpublic data until completion of the evaluation process. After a granting agency has completed the evaluation process, all remaining data in the responses is public with the exception of trade secret data as defined and classified in section [13.37](https://www.revisor.mn.gov/statutes/cite/13.37). A statement by a grantee that the response is copyrighted or otherwise protected does not prevent public access to the response.  **Certification**: I have read the above statements and agree to supply the information requested to the MN Department of Employment and Economic Development with full knowledge of the information provided herein. I certify that all information provided herein is true and accurate and that the official signing this form has authorization to do so. | | | | |
| Name and title of individual authorized to commit applicant to this agreement: | | | | |
| Name: | |  | Signature: |  |
| Title: | |  | Date: |  |
| **SECTION A. APPLICANT AGENCY** | | | | |
| In the space below, provide a description of the applicant agency including information on the agency’s history of performing the work that will be provided through the proposed project. Include information on the agency’s current budget, experience working with targeted populations, and experience providing support services, employment services, and training programs. | | | | |
|  | | | | |
| In the space below, describe current staffing and staff responsibilities as it pertains to the proposed project. Also indicate if any current staff has experience with the Workforce One database. | | | | |
|  | | | | |
| In the space below, describe the agency’s experience managing state or federal grants and list any grants the applicant agency has been awarded from the Department of Employment and Economic Development in the past five years. | | | | |
|  | | | | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Past Program Performance | | | | | | | | |
| Program Name: | |  | | | | Timeframe: |  | |
| Number Enrolled | Number Completed | Completion Rate | Number Placed\* | Placement  Rate\*\* | Two Quarter Retention Rate | Percent Receiving Industry Recognized Credential/Certificate | | Avg. Start  Wage |
|  |  |  |  |  |  |  | |  |
| Program Name: | |  | | | | Timeframe: |  | |
| Number Enrolled | Number Completed | Completion Rate | Number Placed | Placement  Rate | Two Quarter Retention Rate | Percent Receiving Industry Recognized Credential/Certificate | | Avg. Start  Wage |
|  |  |  |  |  |  |  | |  |
| Program Name: | |  | | | | Timeframe: |  | |
| Number Enrolled | Number Completed | Completion Rate | Number Placed | Placement  Rate | Two Quarter Retention Rate | Percent Receiving Industry Recognized Credential/Certificate | | Avg. Start  Wage |
|  |  |  |  |  |  |  | |  |

\* Only include those placed in training-related jobs.

\*\* Percent placed of those who completed training.

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| **SECTION B. TRAINING PROVIDER(S)** |
| If different from the applicant agency, provide a description of the training provider(s). |
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| **SECTION C. LINKAGE ORGANIZATION(S)** |
| Describe partnerships with businesses or other organizations. Include the name, address and contact information for any organizations participating in the project and a description of the services the organization will be contributing. |
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| **SECTION D. CURRICULUM/WORK STATEMENT** |
| Describe the proposed training program and work plan including a description of participant screening and assessments, support services to be provided, placement activities, retention strategies, and other related services to be provided. |
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|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| In the table provided below, indicate the course title(s) or training topic(s) you are planning to provide. For each course or topic indicate the number of trainees; the total number of hours the trainees will spend in the course or training topic; any certification the trainees will receive as a result of the training (i.e. number of credits or CEU’s); the name of the training provider; the targeted occupation(s) related to the training; and the average starting hourly wage without benefits. | | | | | |
| Course Title or Training Topic | Number of Trainees | Number of Training Hours | Certification | Training Provider | Targeted Occupation(s) |
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| **SECTION E. TARGETED OCCUPATIONS & LABOR MARKET INFORMATION** |
| Describe the demand in the labor market for the skills to be provided through the proposed training and opportunities for wage progression and career advancement. |
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| --- | --- | --- | --- | --- | --- | --- | --- |
| Targeted Occupations | | | | | | | |
| In this table, indicate the occupations trainees are expected to be immediately qualified for upon the completion of the provided training program. Use the most current data provided by the Department of Employment and Economic Development in the Job Vacancy Survey and Occupations in Demand report. Data can be found at <http://mn.gov/deed/data/data-tools/job-vacancy/> and <http://mn.gov/deed/data/data-tools/oid/>. Data **must be specific to the region(s) served** by the applicant agency. Specify the region the data represents in the space provided. Please note there is a difference between the Median Wage Offer and Median Wage. Provide the median wage offer, which is an hourly rate and is located on the Job Vacancy Survey. For some occupations, data may not be available in both the Job Vacancy Survey and Occupation in Demand. In these cases, indicate “NA” (not available) in the columns for which data isn’t available for the occupation. | | | | | | | |
| **Region:** |  | **Job Vacancy Survey (JVS) Data** | | | **Occupations in Demand (OID) Data** | | |
| SOC Code | Occupation | No. of Vacancies | % Part Time | Median Wage Offer | Planning Area Growth Rate | Current Demand | |
| Rank | Indicator |
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| Occupations in Career Ladder | | | | | | | | |
| In this table, indicate the occupations related to the training to be provided that trainees may qualify for with additional training/education or experience. Use the most current data provided by the Department of Employment and Economic Development in the Job Vacancy Survey and the Occupations in Demand report. Data must be specific to the region served by the applicant agency. Data can be found at the following links: <http://mn.gov/deed/data/data-tools/job-vacancy/> and <http://mn.gov/deed/data/data-tools/oid/>. | | | | | | | | |
| Region: |  | **Job Vacancy Survey (JVS) Data** | | | **Occupations in Demand (OID) Data** | | | |
| SOC Code | Occupation | No. of Vacancies | % Part Time | Median Wage Offer | Planning Area Growth Rate | Current Demand | | Education Requirements |
| Rank | Indicator |
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| **SECTION F. TARGET POPULATION CHARACTERISTICS** | | | |
|  | Female | Male | Total |
| Indicate the number of trainees you expect are currently employed. |  |  |  |
| Indicate the number you expect are currently unemployed in the following categories: |  |  |  |
| a. Recently Unemployed |  |  |  |
| b. Long-Term Unemployed (27 weeks or more) |  |  |  |
| **3. TOTAL** (#1 through #2b) |  |  |  |
| 4. Indicate the approximate number of trainees returning to work from public assistance. |  |  |  |
| 5. Indicate the approximate number of trainees that are older workers (55 or older). |  |  |  |
| 6. Indicate the approximate number of trainees that are Veterans. |  |  |  |
| 7. Indicate the approximate number of trainees that are people of color. |  |  |  |
| 8. Indicate the approximate number of trainees that have disabilities. |  |  |  |

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| **SECTION G**. **EXPECTED COMPLETION AND PLACEMENT RATES** | | | | | |
| Training Area | Number Enrolled | Expected Completion | Expected Completion Rate | Expected Number Placed | Placement Rate |
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| **SECTION H. BUDGET** | | | |
| In the following format, provide the Course Title or Training Topic, description of materials or supplies, and description of test or certification fees for each training activity and its associated cost. This would include the name of the course or training topic which corresponds in Section B. “Curriculum/Work Statement”. Under the “Cost Per Trainee/Item” section, indicate the total cost per trainee to take the course or training for which you are requesting MJSP funds. Next, indicate the total number of trainees who will take the course or training, or the number of other items such as text books, and then indicate the total cost for the budget item. | | | |
| **Description of Budget Item**  (On separate lines, list the course title(s) or training topic(s), the specific course materials or supplies, or specific test or certification fees. Insert additional lines if necessary.) | **Cost per Trainee or Item** (i.e. the cost per credit, class, text book etc.) | **Number of Trainees or Items** | **Total**  **Cost** |
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| **Total Direct Training Costs** | | |  |
| Administrative Allowance (Up to 10% of direct training costs can be requested for administrative costs. To request these funds, you must complete the Request for Administrative Funds section below.) | | |  |
| **TOTAL COSTS** | | |  |

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| --- |
| Request for Administrative Funds |
| If you are requesting administrative funds, please explain the need for the funds in the space provided below. Administrative funds may only be requested if no other funding source is available. Include a detailed description of how the funds will be used. In your description, specify the staff position(s) that will be fully or partially funded through the use of the administrative allowance, the wage rate for the position(s), the approximate number of hours that will be spent on project related activities and a description of the project related activities for which administrative funds will be used. See page two of the application instructions for a description of allowable administrative costs. |
|  |

EXHIBIT A. CONFLICT OF INTEREST DISCLOSURE

**INSTRUCTIONS:** Please return your completed form as part of the Response submittal.

This form gives applicants and grantees an opportunity to disclose any actual or potential conflicts of interest that may exist when receiving a grant. It is the applicant/grantee’s obligation to be familiar with the Office of Grants Management (OGM) Grants Policy 08-01 Conflict of Interest Policy for State Grant-Making and to disclose any conflicts of interest accordingly. Policy 08-01 can be found on the [Office of Grants Management website](https://mn.gov/admin/government/grants/policies-statutes-forms/) under Current Policies.

All grant applicants must complete and sign a conflict of interest disclosure form.

I or my grant organization do NOT have an ACTUAL or POTENTIAL conflict of interest.

If at any time after submission of this form, I or my grant organization discover any conflict of interest(s), I or my grant organization will disclose that conflict immediately to the appropriate agency or grant program personnel.

I or my grant organization have an ACTUAL or POTENTIAL conflict of interest. (*Please describe below*):

If at any time after submission of this form, I or my grant organization discover any additional conflict of interest(s), I or my grant organization will disclose that conflict immediately to the appropriate agency or grant program personnel.

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | | |
| Title: |  | | |
| Signature: |  | Date: |  |

EXHIBIT B: CERTIFICATION: NO CONVICTION OF FELONY FINANCIAL CRIME BY A PRINCIPAL

**INSTRUCTIONS:** Grant applicant must certify to this condition required under this Grant Request for Proposal.

16B.981 Subd. 2 (6) requires that no current principals of a grantee have been convicted of a felony financial crime in the last 10 years. A principal is defined as a public official, a board member, or staff (paid or volunteer) with the authority to access funds provided by this grant opportunity or to determine how those funds are used.

Please sign below to finalize response and submit this document as part of the grant application materials/response to the Grant Request for Proposal.

Please upload or attach an organizational chart or list of principals that you are certifying for below.

**By signing here, I warrant that no current principal of my organization has been convicted of a felony financial crime in the last 10 years.**

I certify that this information is true, correct, and reliable.

The submission of inaccurate or misleading information may be grounds for disqualification from the grant contract agreement award and may subject me/my organization to suspension or debarment proceedings, as well as other remedies available to the State, by law.

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | | |
| Title: |  | | |
| Signature: |  | Date: |  |

**EXHIBIT C: REQUIRED NONPROFIT GRANTEE DOCUMENTS AS APPLICABLE**

**INSTRUCTIONS:** If the applicant is a non-profit organization, answer the following questions and provide the requested information as required by 16B.981 Subd. 2 (2) and Subd. 2 (5) as part of the pre-award risk assessment.

1. Were you required to submit a 990 or a form 990-EZ for your organization’s last fiscal year?

Yes

No

* If yes, include a copy of your 990 or 990EZ with your grant application and continue to question 3.
* If no, continue to question 2.

1. If you are exempt from filing or your organization has been in business for less than one year, please describe the internal controls you have over business expenditures and outcomes of the grant funds, if awarded. Examples of internal controls include but are not limited to: documented policies and procedures; segregation of duties such as having different staff who enter receivables versus those who post payments; using a payroll system; requiring usernames and passwords, along with appropriate levels of access to systems; supervisor review and approval of payments and timecards; and other internal controls to ensure compliance with laws and regulations and safeguard use of grant funds.
2. Are you a charitable organization that made over $750,000 in your last fiscal year and were required to have an audited financial statement per MS 309.53? If yes, include a copy of your audited financial statements.

Yes

No

* If the applicant has not been in existence long enough or is not required to file Form 990, Form 990 EZ or does not have audited financial statements, the nonprofit grant applicant must:
  + - Demonstrate exemption – i.e. Provide a copy of the IRS determination letter
    - Submit the most recent set of board-reviewed (or managing group if applicable) financial statements

4. Is your organization registered with the Secretary of State and has a status of “In Good Standing”?

☐ Yes

☐ No

By signing below, I certify that the information provided is true, correct, and reliable. The submission of inaccurate or misleading information may be grounds for disqualification from the grant contract agreement award and may subject me/this for-profit entity to suspension or debarment proceedings, as well as other remedies available to the State, by law.

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | | |
| Title: |  | | |
| Signature: |  | Date: |  |

**EXHIBIT D: FOR-PROFIT REQUIRED DOCUMENTS, LIEN DISCLOSURE, AND CERTIFICATION**

**INSTRUCTIONS:** Please answer the following questions and provide the requested certification.

1. Has the for-profit entity filed its most recent state and federal tax returns?

Yes

No

* If yes, include a copy of your state and federal tax returns with your grant application and continue to number 3.
* If no, continue to question 2.

1. If you have been in business less than a year, please describe the internal controls you have over business expenditures and outcomes of the grant funds, if awarded. Examples of internal controls include but are not limited to: documented policies and procedures; segregation of duties such as having different staff who enter receivables versus those who post payments, using a payroll system, requiring usernames and passwords along with appropriate levels of access to systems, supervisor review and approval of payments and timecards, and other internal controls to ensure compliance with laws and regulations and safeguard use of grant funds.
2. Provide a copy of your organization’s most recent financial statements.
3. Asset lien disclosure:

I do not have any liens on assets

I do have liens on assets: Please describe the assets and associated liens below:

1. Certify organization is not under bankruptcy proceedings.

I certify that the business is not under bankruptcy proceedings.

6. Is your organization registered with the Secretary of State and has a status of “In Good Standing”?

Yes

No

By signing below, I certify that the information provided is true, correct, and reliable. The submission of inaccurate or misleading information may be grounds for disqualification from the grant contract agreement award and may subject me/this for-profit entity to suspension or debarment proceedings, as well as other remedies available to the State, by law.

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| --- | --- | --- | --- |
| Name: |  | | |
| Title: |  | | |
| Signature: |  | Date: |  |