

1995-96 SESSION
COMMITTEE HEARING
RECORDS

Committee Name:

Joint Committee on
Finance (JC-Fi)

Sample:

Record of Comm. Proceedings ... RCP

- 05hrAC-EdR_RCP_pt01a
- 05hrAC-EdR_RCP_pt01b
- 05hrAC-EdR_RCP_pt02

➤ Appointments ... Appt

➤ **

➤ Clearinghouse Rules ... CRule

➤ **

➤ Committee Hearings ... CH

➤ **

➤ Committee Reports ... CR

➤ **

➤ Executive Sessions ... ES

➤ **

➤ Hearing Records ... HR

➤ **

➤ Miscellaneous ... Misc

➤ 95hrJC-Fi_Misc_pt110

➤ Record of Comm. Proceedings ... RCP

➤ **

STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY

November 14, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

All-Volunteer Force Educational Assistance
(Apprenticeship Program), State Application
Identifier Number WI971024-297-N64124XX

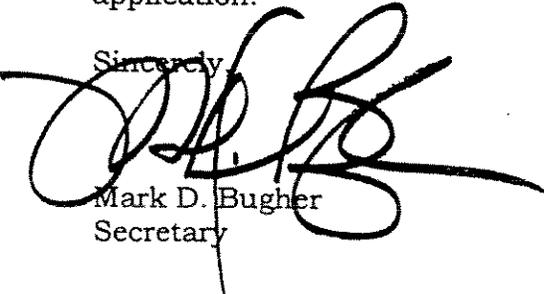
Dear Secretary Stewart:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to s. 16.54, Wis. Stats., the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

A copy of this letter must be transmitted to the federal granting agency with your application.

Sincerely,



Mark D. Bugher
Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

<p>1 Applicant Agency Dept. of Workforce Development</p> <p>4 Address (Street/City/State/Zip) 210 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946</p> <p>Contact Person Sue Huss</p> <p>Phone 266-3338</p> <p>8 Agency Project Title Department of Veteran's Affairs-Apprenticeship Program</p> <p>11 Type of Application <input type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input checked="" type="checkbox"/> Continuation-Modified </p> <p>12 Type of Assistance <input type="checkbox"/> Grant <input type="checkbox"/> Formula <input checked="" type="checkbox"/> Discretionary <input type="checkbox"/> Other </p> <p>13 Number of Years Previously Funded More than 9 years</p>	<p>2 CFDA # 6 4 1 2 4</p> <p>5 Federal Agency to Receive Request Department of Veteran's Affairs</p> <p>6 Period of Funding Mo/Day/Year 10/01/97 09/30/98</p> <p>7 Application Due Date Mo/Day/Year 10/17/97</p> <p>9 Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <i>No Fed EO</i> </p> <p>10 Area of Impact Counties/States Statewide</p>																																																																																				
<p>14 Funding, Allotment and Position Data (including Federal indirect costs) Total Federal Funds Applied For \$ 149,815</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Appropriation</th> <th rowspan="2">Source</th> <th rowspan="2">Revenue Type</th> <th rowspan="2">Amount</th> <th colspan="2">New Positions</th> <th colspan="2">Existing Positions</th> </tr> <tr> <th>No. (FTE)</th> <th>Type</th> <th>No. (FTE)</th> <th>Type</th> </tr> </thead> <tbody> <tr> <td>141</td> <td>Federal</td> <td>PR-F</td> <td>\$ 148,901</td> <td></td> <td></td> <td>2.60</td> <td>Perm</td> </tr> <tr> <td>153-Indirect</td> <td>Federal</td> <td>PR-F</td> <td>\$ 914</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Appropriation	Source	Revenue Type	Amount	New Positions		Existing Positions		No. (FTE)	Type	No. (FTE)	Type	141	Federal	PR-F	\$ 148,901			2.60	Perm	153-Indirect	Federal	PR-F	\$ 914								\$								\$								\$								\$								\$								\$								\$				
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<p>Reviewing Analyst <i>Peter Maternow</i> Phone <i>4-8259</i></p> <p>Recommendation: <input checked="" type="checkbox"/> Approve <input type="checkbox"/> Approve With Conditions <input type="checkbox"/> Deny</p> <p>Signature <i>[Signature]</i> Date <i>11/10/97</i></p> <p>COMMENTS:</p>																																																																																					
<p>SAI Number <i>WI991024</i></p> <p>Date Received <i>10-24-97</i></p> <p>Date Due <i>11-7-97</i></p>																																																																																					

STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

June 16, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

Migrant and Seasonal Farmworker Program,
State Application Identifier Number
WI970428-099-N17247XX

Dear Secretary Stewart:

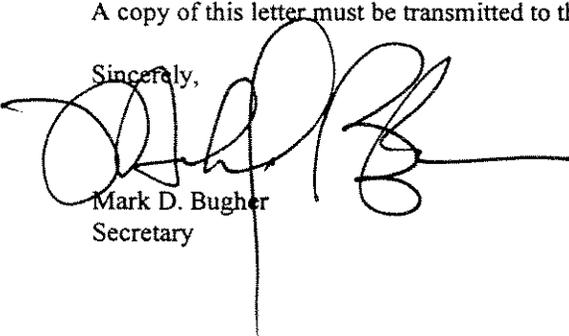
The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to s. 16.54, Wis. Stats., the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

A copy of this letter must be transmitted to the federal granting agency with your application.

Sincerely,


Mark D. Bugher
Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

1 Applicant Agency Dept. of Workforce Development		2 CFDA # 17.247																																																																																					
4 Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Mary Cirilli Phone 267-7273		5 Federal Agency to Receive Request U. S. Department of Labor																																																																																					
		6 Period of Funding Mo/Day/Year 07/01/97 06/30/98	7 Application Due Date Mo/Day/Year 04/30/97																																																																																				
8 Agency Project Title Application for JTPA Section 402 Migrant and Seasonal Farmworker Program		9 Executive Order 12372 Review Required <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <i>needs wt</i> <i>EO</i>																																																																																					
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Recommendation: <input checked="" type="checkbox"/> Approve <input type="checkbox"/> Approve With Conditions <input type="checkbox"/> Deny		Date Received <i>4/28/97</i>																																																																																					
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STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY

October 22, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

Rehabilitation Long-Term Training
(Cultural Training for VR Counselors),
State Application Identifier Number
WI971007-284-N84129XX

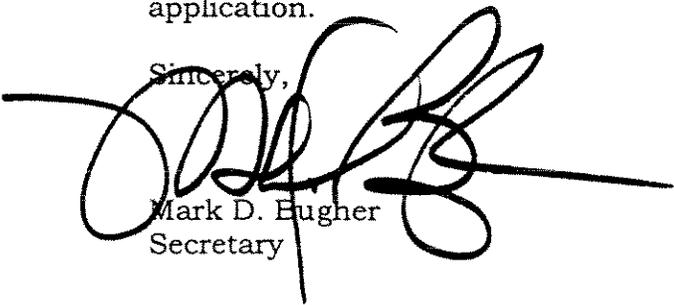
Dear Secretary Stewart:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to s. 16.54, Wis. Stats., the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

A copy of this letter must be transmitted to the federal granting agency with your application.

Sincerely,


Mark D. Bugher
Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

Rehab, Long-Term Training

1	Applicant Agency Dept. of Workforce Development	2	CFDA # 8 4 . 1 2 9			
4	Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Joan Gage Phone 243-5658	5	Federal Agency to Receive Request U. S. Department of Education: Rehab Services Administration			
		6	Period of Funding Mo/Day/Year 10/01/97 09/30/98	7	Application Due Date Mo/Day/Year 09/12/97	
8	Agency Project Title Cultural Training for VR Counselors	9	Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <u>No WTEO</u>			
11	Type of Application <input checked="" type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input type="checkbox"/> Continuation-Modified	12	Type of Assistance Grant <input type="checkbox"/> Formula <input checked="" type="checkbox"/> Discretionary Other			
13	Number of Years Previously Funded -0-	All				
14	Funding, Allotment and Position Data (including Federal indirect costs) Total Federal Funds Applied For \$67,059					
	Numeric	Source	Revenue Type	Amount	New Positions No. (FTE) Type	Existing Positions No. (FTE) Type
	542	Federal	PR-F	\$ 67,059		
	502	State	GPR	\$ 7,451		
				\$		
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				\$		
15	Indirect Cost Reimbursement <input type="checkbox"/> Yes Rate <input checked="" type="checkbox"/> No					
16	Authorizations <input type="checkbox"/> Delegated Review	Authorized Agency Representative (Type or Print) Dan Ryan Signature <i>Dan Ryan</i>		Title if other than Agency Secretary Budget Analyst Date 9/22/97		

FOR DEPARTMENT OF ADMINISTRATION USE ONLY

Reviewing Analyst	Peter Maternowski	Phone	4-8259	SAI Number	WI 971007-284
Recommendation:	<input checked="" type="checkbox"/> Approve	<input type="checkbox"/> Approve With Conditions	<input type="checkbox"/> Deny	Date Received	10-17-97
Signature	<i>Peter Maternowski</i>	Date	10-21-97	Date Due	10-21-97

COMMENTS:

STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY

August 13, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

Refugee and Entrant Assistance-
Discretionary Grants (Assisting Older
Refugees), State Application Identifier
Number WI970731-214-N93576XX

Dear Secretary Stewart:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to s. 16.54, Wis. Stats., the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

A copy of this letter must be transmitted to the federal granting agency with your application.

Sincerely,

A handwritten signature in black ink, appearing to read "Mark D. Bugher", written over a circular stamp or seal.

Mark D. Bugher
Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

Grants

Refugee & Entrant Asst. - Discretionary

<p>1 Applicant Agency Dept. of Workforce Development</p> <p>4 Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946</p> <p>Contact Person Susan Levy Phone 266-0578</p> <p>8 Agency Project Title Assisting Older Refugees</p> <p>11 Type of Application <input checked="" type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input type="checkbox"/> Continuation-Modified </p> <p>12 Type of Assistance Grant <input type="checkbox"/> Formula <input checked="" type="checkbox"/> Discretionary <input type="checkbox"/> Other </p> <p>13 Number of Years Previously Funded n/a</p>	<p>2 CFDA # 93.576</p> <p>5 Federal Agency to Receive Request DH&SS, Admin. for Children & Families</p> <p>6 Period of Funding Mo/Day/Year 9/30/97 9/29/98</p> <p>7 Application Due Date Mo/Day/Year 7/30/97</p> <p>9 Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates No WF EO </p> <p>10 Area of Impact Counties/States Statewide</p>																																																																												
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<p>Reviewing Analyst <i>Ter Materowski</i> Phone <i>A-8259</i> SAI Number <i>WF 970731-211</i></p> <p>Recommendation: <input type="checkbox"/> Approve <input checked="" type="checkbox"/> Approve With Conditions <input type="checkbox"/> Deny Date Received <i>7-31-97</i></p> <p>Signature <i>Annex Sejna</i> Date <i>8/7/97</i> Date Due <i>8-14-97</i></p>																																																																													

STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin



Mailing Address:
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Madison, WI 53707-7864

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY

October 13, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

Food Stamp (Employment and Training),
State Application Identifier Number
WI971008-292-N10561XX

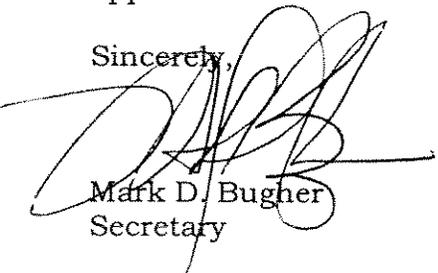
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Sincerely,



Mark D. Bugher
Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

<p>1 Applicant Agency Dept. of Workforce Development</p> <p>4 Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Tad Mangesha Phone 266-2710</p> <p>8 Agency Project Title Food Stamp Employment & Training <i>FPY 98</i></p> <p>11 Type of Application <input type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input checked="" type="checkbox"/> Continuation-Modified </p> <p>13 Number of Years Previously Funded <i>10</i></p> <p>14 Funding, Allotment and Position Data (including Federal indirect costs) Total Federal Funds Applied For \$8,778,883</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Appropriation</th> <th>Source</th> <th>Revenue Type</th> <th>Amount</th> <th>New Positions No. (FTE)</th> <th>Type</th> <th>Existing Positions No. (FTE)</th> <th>Type</th> </tr> </thead> <tbody> <tr> <td>301</td> <td>State</td> <td>GPR</td> <td>\$ 275,000</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>315</td> <td>State/Local</td> <td>GPR/Local</td> <td>\$ 6,950,000</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>358</td> <td>Fed</td> <td>PR-F</td> <td>\$ 8,385,223</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>359</td> <td>Fed</td> <td>PR-F</td> <td>\$ 393,660</td> <td></td> <td></td> <td>1.0</td> <td>Perm</td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Appropriation	Source	Revenue Type	Amount	New Positions No. (FTE)	Type	Existing Positions No. (FTE)	Type	301	State	GPR	\$ 275,000					315	State/Local	GPR/Local	\$ 6,950,000					358	Fed	PR-F	\$ 8,385,223					359	Fed	PR-F	\$ 393,660			1.0	Perm				\$								\$								\$								\$								\$					<p>2 CFDA # 1 0 . 5 6 1</p> <p>5 Federal Agency to Receive Request U. S. Department of Agriculture - Food & Consumer Service</p> <p>6 Period of Funding Mo/Day/Year 10-1-97 9-30-98</p> <p>7 Application Due Date Mo/Day/Year 09-26-1997</p> <p>9 Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <i>No WI EO</i> </p> <p>10 Area of Impact Counties/States Statewide</p>
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<p>15 Indirect Cost Reimbursement <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Rate Base Amount </p> <p>18 Authorizations <input type="checkbox"/> Delegated Review Authorized Agency Representative (Type or Print) Robert Nikolay Signature <i>Robert Nikolay</i> Title if other than Agency Secretary Budget Section Chief Date 9-26-97 </p>																																																																																	

FOR DEPARTMENT OF ADMINISTRATION USE ONLY

Reviewing Analyst <i>Jennifer Saina</i> Phone <i>6-82-19</i>	SAI Number <i>WI 971008-227</i>	Date Received <i>10-8-97</i>
Recommendation: <input type="checkbox"/> Approve <input checked="" type="checkbox"/> Approve With Conditions <input type="checkbox"/> Deny	Date Due <i>10-22-97</i>	
Signature <i>Jennifer Saina</i> Date <i>10/9/97</i>		

COMMENTS:

STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY

August 4, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

Unemployment Insurance (UI Grants),
State Application Identifier Number
WI970728-211-N17225XX

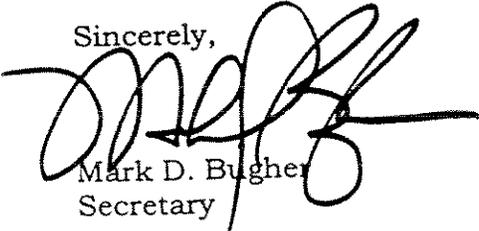
Dear Secretary Stewart:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to s. 16.54, Wis. Stats., the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

A copy of this letter must be transmitted to the federal granting agency with your application.

Sincerely,


Mark D. Bugher
Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2126

1 Applicant Agency Dept. of Workforce Development			2 CFDA # 17.225																																																																																					
4 Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Bill Weber Phone 268-8220			5 Federal Agency to Receive Request U. S. Dept. of Labor																																																																																					
6 Agency Project Title UI GRANTS			7 Application Due Date Mo/Day/Year 10/1/96 9/30/97																																																																																					
11 Type of Application <input checked="" type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input type="checkbox"/> Continuation-Modified		12 Type of Assistance Grant <input checked="" type="checkbox"/> Formula <input type="checkbox"/> Discretionary Other		9 Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <u>No Fed EO</u>																																																																																				
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Reviewing Analyst <u>Peter Maternowski</u> Phone <u>4-8259</u> SAI Number <u>WI 970728-2</u> Recommendation: <input checked="" type="checkbox"/> Approve <input type="checkbox"/> Approve With Conditions <input type="checkbox"/> Deny Date Received <u>7-28-97</u> Signature <u>[Signature]</u> Date <u>8-1-97</u> Date Due <u>Full</u> COMMENTS:																																																																																								

STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

August 6, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

Vocational Rehabilitation Services State
Plan Title 1-B Services, State Application
Identifier Number WI970717-195-N84126XX

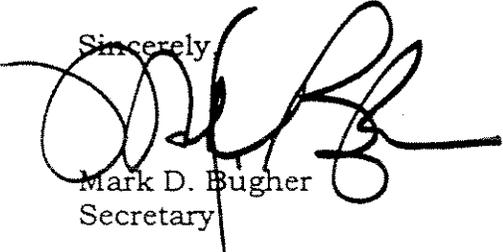
Dear Secretary Stewart:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to s. 16.54, Wis. Stats., the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

A copy of this letter must be transmitted to the federal granting agency with your application.

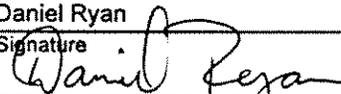
Sincerely,


Mark D. Bugher
Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

1	Applicant Agency Dept. of Workforce Development	2	CFDA # 84.126																																																												
4	Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Regina Rhyne Phone 243-5652	5	Federal Agency to Receive Request Rehabilitation Services Administration, Dept. of Education																																																												
6	Period of Funding Mo/Day/Year 10/01/97 09/30/98	7	Application Due Date Mo/Day/Year 07/01/97																																																												
8	Agency Project Title Vcational Rehabilitation Services State Plan Title I-B Services	9	Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <u>No WI EO</u>																																																												
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FOR DEPARTMENT OF ADMINISTRATION USE ONLY																																																															
Reviewing Analyst <u>Peter Maternowski</u>		Phone <u>4-8259</u>	SAI Number <u>WI970717-1</u>																																																												
Recommendation: <input checked="" type="checkbox"/> Approve <input type="checkbox"/> Approve With Conditions <input type="checkbox"/> Deny		Date <u>8-1-97</u>	Date Received <u>7-17-97</u>																																																												
Signature 		Date Due <u>7-31-97</u>																																																													
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STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY

August 5, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

One-Stop Labor Market Information
Grant, State Application Identifier
Number WI970728-212-N17207XX

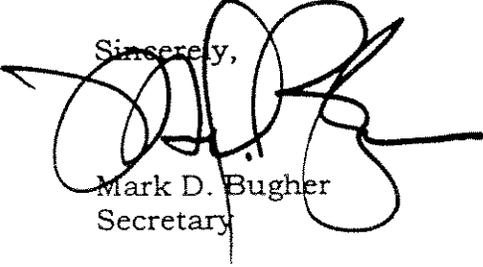
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The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

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Sincerely,


Mark D. Bugher
Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

1	Applicant Agency Department of Workforce Development	2	CFDA # 17.207
4	Address (Street/City/State/Zip) 210 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Sue Huss Phone 266-3338	5	Federal Agency to Receive Request U. S. Dept. of Labor
		6	Period of Funding Mo/Day/Year 07/01/97 06/30/97
		7	Application Due Date Mo/Day/Year 07/25/97
8	Agency Project Title One-Stop Labor Market information Grant	9	Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates
11	Type of Application <input type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input checked="" type="checkbox"/> Continuation-Modified	12	Type of Assistance Grant <input checked="" type="checkbox"/> Formula <input type="checkbox"/> Discretionary Other
13	Number of Years Previously Funded 3 years	1	Area of Impact Counties/States Statewide
14	Funding, Allotment and Position Data (including Federal indirect costs) Total Federal Funds Applied For \$285,273		
	Numeric Appropriation	Source	Revenue Type
			Amount
			New Positions No. (FTE) Type
			Existing Positions No. (FTE) Type
	E1 (151)	Federal	PR-F \$ 283,324
	E3 (153)	Federal	PR-F \$ 1,949
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
15	Indirect Cost Reimbursement <input checked="" type="checkbox"/> Yes Rate 1% of Salaries Base \$194,860 Amount \$1,949 <input type="checkbox"/> No		
16	Authorizations <input checked="" type="checkbox"/> Delegated Review	Authorized Agency Representative (Type or Print) Sue Huss Signature <i>Sue Huss</i>	Title if other than Agency Secretary Budget Analyst Date 7/24/97
Reviewing Analyst	<i>Peter Maternowski</i> Phone 4-8259		SAI Number <i>WI970728-2</i>
Recommendation:	<input checked="" type="checkbox"/> Approve <input type="checkbox"/> Approve With Conditions <input type="checkbox"/> Deny		Date Received <i>7-28-97</i>
Signature	<i>[Signature]</i> Date <i>8.5.97</i>		Date Due <i>Del.</i>
COMMENTS:			

STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

July 15, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

Employment Service (State/Local Planning
Information), State Application Identifier
Number WI970627-179-N17207XX

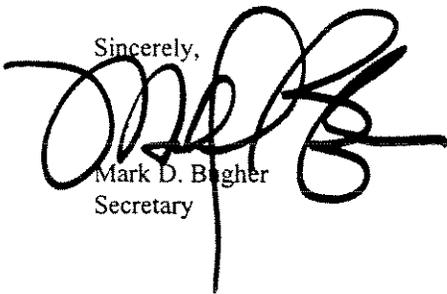
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Employment Service

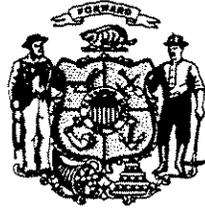
<p>1 Applicant Agency <u>Workforce Dev.</u> Dept. of Industry, Labor & Human Relations</p> <p>4 Address (Street/City/State/Zip) 210 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Sue Huss Phone 266-3338</p> <p>8 Agency Project Title State/Local Planning Information (LMI)</p> <p>11 Type of Application <input type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input checked="" type="checkbox"/> Continuation-Modified </p> <p>13 Number of Years Previously Funded More than 6 years</p> <p>14 Funding, Allotment and Position Data (including Federal indirect costs) Total Federal Funds Applied For <u>\$127,629</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Appropriation</th> <th rowspan="2">Source</th> <th rowspan="2">Revenue Type</th> <th rowspan="2">Amount</th> <th colspan="2">New Positions</th> <th colspan="2">Existing Positions</th> </tr> <tr> <th>No. (FTE)</th> <th>Type</th> <th>No. (FTE)</th> <th>Type</th> </tr> </thead> <tbody> <tr> <td>E1 (151)</td> <td>Federal</td> <td>PRF</td> <td style="text-align: right;">\$ 126,852</td> <td></td> <td></td> <td style="text-align: right;">1.96</td> <td>Perm</td> </tr> <tr> <td>E3 (153)</td> <td>Federal</td> <td>PRF</td> <td style="text-align: right;">\$ 777</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> <p>15 Indirect Cost Reimbursement <input checked="" type="checkbox"/> Yes Rate 1% of Salaries Base \$77,641 Amount \$777 <input type="checkbox"/> No </p> <p>16 Authorizations <input checked="" type="checkbox"/> Delegated Review </p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Authorized Agency Representative (Type or Print) Sue Huss</td> <td style="width: 70%;">Title if other than Agency Secretary Budget Analyst</td> </tr> <tr> <td>Signature <i>Sue Huss</i></td> <td>Date 6/25/97</td> </tr> </table>	Appropriation	Source	Revenue Type	Amount	New Positions		Existing Positions		No. (FTE)	Type	No. (FTE)	Type	E1 (151)	Federal	PRF	\$ 126,852			1.96	Perm	E3 (153)	Federal	PRF	\$ 777																																																																													Authorized Agency Representative (Type or Print) Sue Huss	Title if other than Agency Secretary Budget Analyst	Signature <i>Sue Huss</i>	Date 6/25/97	<p>2 CFDA # 17.207</p> <p>5 Federal Agency to Receive Request U. S. Dept. of Labor</p> <p>6 Period of Funding Mo/Day/Year 07/01/97 06/30/98</p> <p>7 Application Due Date Mo/Day/Year 06/30/97</p> <p>9 Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <u>No WTEO</u> </p> <p>10 Area of Impact Counties/States Statewide</p>
Appropriation					Source	Revenue Type	Amount	New Positions		Existing Positions																																																																																															
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Signature <i>Sue Huss</i>	Date 6/25/97																																																																																																								

FOR DEPARTMENT OF ADMINISTRATION USE ONLY

Reviewing Analyst	<u>Peter Maternowski</u> Phone <u>4-8259</u>	SAI Number <u>WI970627-179</u>	
Recommendation:	<input type="checkbox"/> Approve <input type="checkbox"/> Approve With Conditions <input type="checkbox"/> Deny	Date Received <u>6-27-97</u>	
Signature	Date	Date Due <u>6-27-97</u>	
COMMENTS:			

N
17
20
X
X

STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY

July 22, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

Child Support Enforcement (Team Parenting
Demonstration-Racine County), State Application
Identifier Number WI970717-200-N93563YY

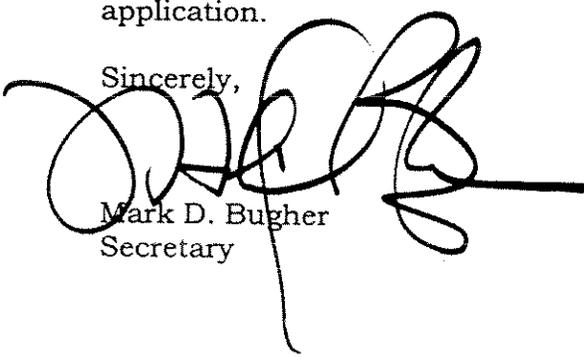
Dear Secretary Stewart:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to s. 16.54, Wis. Stats., the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

A copy of this letter must be transmitted to the federal granting agency with your application.

Sincerely,


Mark D. Bugher
Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

Child Support Enforcement

<p>1 Applicant Agency Dept. of Workforce Development</p>	<p>2 CFDA # 93.563</p>
<p>4 Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Roni Harper Phone 266-1175</p>	<p>5 Federal Agency to Receive Request DH&HS, Administration for Children & Families</p>
<p>6 Agency Project Title Team Parenting Demonstration - Racine County</p>	<p>7 Application Due Date Mo/Day/Year 07/02/97</p>
<p>11 Type of Application <input checked="" type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input type="checkbox"/> Continuation-Modified</p>	<p>12 Type of Assistance Grant <input type="checkbox"/> Formula <input checked="" type="checkbox"/> Discretionary Other</p>
<p>13 Number of Years Previously Funded n/a</p>	<p>9 Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <i>No WPEO</i></p>

14 Funding, Allotment and Position Data (including Federal indirect costs)
Total Federal Funds Applied For **\$237,500**

Appropriation	Source	Revenue Type	Amount	New Positions		Existing Positions	
				No. (FTE)	Type	No. (FTE)	Type
349	Federal	PR-F	\$ 237,500			0.5	perm
	Local	match	\$ 12,500				
			\$				
			\$				
			\$				
			\$				
			\$				
			\$				

15 Indirect Cost Reimbursement
 Yes Rate _____ Base _____ Amount _____ No

16 Authorizations	Authorized Agency Representative (Type or Print) Dan Ryan	Title if other than Agency Secretary Budget Analyst
<input type="checkbox"/> Delegated Review	Signature <i>Dan Ryan</i>	Date

FOR DEPARTMENT OF ADMINISTRATION USE ONLY

Reviewing Analyst: Jennifer Sajka Phone: 6-8219 SAI Number: WI 970417-500

Recommendation: Approve Approve With Conditions Deny Date Received: 7-17-97

Signature: Jennifer Sajka Date: _____ Date Due: 7-31-97

COMMENTS: _____

STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

August 29, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

Social Services Research & Demonstration
(State Welfare Reform Evaluation-Pay
for Performance/Self-Sufficiency First),
State Application Identifier Number
WI970508-118-N93647XX

Dear Secretary Stewart:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to s. 16.54, Wis. Stats., the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

A copy of this letter must be transmitted to the federal granting agency with your application.

Sincerely,

A large, stylized handwritten signature in black ink, appearing to read "Mark D. Bugher".

Mark D. Bugher
Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

1 Applicant Agency Dept. of Workforce Development		2 CFDA # 9 3 . 6 4 7																																																																																									
4 Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Ingrid Rothe Phone 266-7046		5 Federal Agency to Receive Request U. S. Department of Health & Human Services; ACF																																																																																									
		6 Period of Funding Mo/Day/Year 04/28/97 12/31/97	7 Application Due Date Mo/Day/Year 01/15/97																																																																																								
8 Agency Project Title State Welfare Reform Evaluation -Pay for Performance/Self-Sufficiency First		9 Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <div style="font-size: 1.5em; text-align: center; margin-top: 10px;">No WT EO</div>																																																																																									
11 Type of Application <input checked="" type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input type="checkbox"/> Continuation-Modified	12 Type of Assistance Grant <input type="checkbox"/> Formula <input checked="" type="checkbox"/> Discretionary <input type="checkbox"/> Other	10 Area of Impact Counties/States Statewide																																																																																									
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14 Funding, Allotment and Position Data (including Federal indirect costs) Total Federal Funds Applied For <u>334,535</u>																																																																																											
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FOR DEPARTMENT OF ADMINISTRATION USE ONLY																																																																																											
Reviewing Analyst <u>Jennifer Sajna</u> Phone <u>6-8219</u> Recommendation: <input checked="" type="checkbox"/> Approve <input type="checkbox"/> Approve With Conditions <input type="checkbox"/> Deny Signature <i>Jennifer Sajna</i> Date <u>5/22/97</u>		SAI Number <u>WT 970508-118</u> Date Received <u>5-8-97</u> Date Due <u>5-22-97</u>																																																																																									
COMMENTS:																																																																																											
<input type="checkbox"/> Comments Continued on Reverse or on a Separate Sheet																																																																																											

64
X

STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

August 29, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

Social Services Research & Demonstration
(State Welfare Reform Evaluation-Wisconsin
Works), State Application Identifier Number
WI970508-117-N93647XX

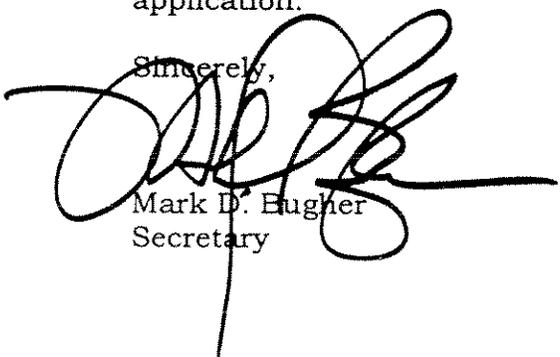
Dear Secretary Stewart:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to s. 16.54, Wis. Stats., the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

A copy of this letter must be transmitted to the federal granting agency with your application.

Sincerely,



Mark D. Bugher
Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

Social Services Research & Demonstration

<p>1 Applicant Agency Dept. of Workforce Development</p>	<p>2 CFDA # 9 3 . 6 4 7</p>
<p>4 Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Ingrid Rothe Phone 266-7046</p>	<p>5 Federal Agency to Receive Request U. S. Department of Health & Human Services; ACF</p> <p>6 Period of Funding Mo/Day/Year 04/28/97 12/31/97</p> <p>7 Application Due Date Mo/Day/Year 01/15/97</p>
<p>8 Agency Project Title State Welfare Reform Evaluation - Wisconsin Works</p>	<p>9 Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <i>No WI EO</i></p> <p>10 Area of Impact Counties/Stages Statewide</p>
<p>11 Type of Application <input checked="" type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input type="checkbox"/> Continuation-Modified</p>	<p>12 Type of Assistance Grant <input type="checkbox"/> Formula <input checked="" type="checkbox"/> Discretionary Other</p>
<p>13 Number of Years Previously Funded -0-</p>	<p>All</p>

14 Funding, Allotment and Position Data (including Federal indirect costs)
Total Federal Funds Applied For 238,536

Appropriation	Source	Revenue Type	Amount	New Positions		Existing Positions	
				No. (FTE)	Type	No. (FTE)	Type
340	Federal	PR-F	\$ 238,536				
			\$ 21,859				
			\$				
			\$				
			\$				
			\$				
			\$				
			\$				
			\$				

15 Indirect Cost Reimbursement
 Yes Rate 0.5% Base Amount No

16 Authorizations
 Delegated Review

Authorized Agency Representative (Type or Print) Dan Ryan	Title if other than Agency Secretary Budget Analyst
Signature <i>Dan Ryan</i>	Date 5/3/97

FOR DEPARTMENT OF ADMINISTRATION USE ONLY

Reviewing Analyst <i>Janifer Saino</i>	Phone 6-8219	SAI Number 6F970508-1171	Date Received 5-8-97
Recommendation: <input checked="" type="checkbox"/> Approve <input type="checkbox"/> Approve With Conditions <input type="checkbox"/> Deny	Date 8/22/97	Date Due 5-22-97	
Signature <i>Janifer Saino</i>			

COMMENTS:

Feds OK'd a planning grant of \$25K only - Budget is being prepared.

64

STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON
GOVERNOR
MARK D. BUGHER
SECRETARY



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

September 9, 1997

Linda Stewart, Secretary
Department of Workforce Development
201 E. Washington Avenue, Room 400x
PO Box 7946
Madison, WI 53707-7946

Social Services Research & Demonstration
(State Welfare Reform Evaluation-Wisconsin
Works) State Application Identifier Number
WI970828-238-N93647XX

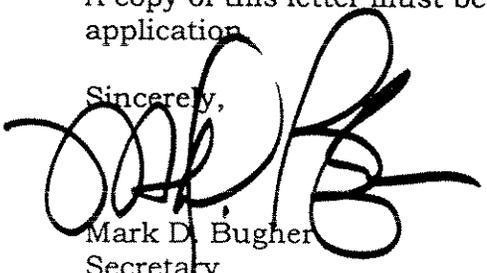
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The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

A copy of this letter must be transmitted to the federal granting agency with your application.

Sincerely,


Mark D. Bugher
Secretary

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

Social Services Res. & Demo.

1 Applicant Agency Dept. of Workforce Development		2 CFDA # 9 3 . 6 4 7	
4 Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Ingrid Rothe Phone 266-7046		5 Federal Agency to Receive Request U. S. Department of Health & Human Services; ACF	
		6 Period of Funding Mo/Day/Year 10/01/97 09/30/98	7 Application Due Date Mo/Day/Year 08/15/97
8 Agency Project Title State Welfare Reform Evaluation - Wisconsin Works		9 Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <i>no WI EO</i>	
11 Type of Application <input checked="" type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input type="checkbox"/> Continuation-Modified		12 Type of Assistance Grant <input type="checkbox"/> Formula <input checked="" type="checkbox"/> Discretionary Other	
13 Number of Years Previously Funded 1 year		All	
14 Funding, Allotment and Position Data (including Federal indirect costs) Total Federal Funds Applied For 100,000			

Appropriation	Source	Revenue Type	Amount	New Positions		Existing Positions	
				No. (FTE)	Type	No. (FTE)	Type
340	Federal	PR-F	\$ 100,000	1.0	FED/project		
	in-kind		\$ 23,539				
			\$				
			\$				
			\$				
			\$				
			\$				
			\$				
			\$				

15 Indirect Cost Reimbursement <input type="checkbox"/> Yes Rate Base Amount <input checked="" type="checkbox"/> No			
16 Authorizations <input type="checkbox"/> Delegated Review		Authorized Agency Representative (Type or Print) Dan Ryan Signature <i>Dan Ryan</i>	Title if other than Agency Secretary Budget Analyst Date 8/15/97

FOR DEPARTMENT OF ADMINISTRATION USE ONLY

Reviewing Analyst <i>D. Jennifer Sajna</i>	Phone 6-8219	SAI Number WI970828-2
Recommendation: <input checked="" type="checkbox"/> Approve <input type="checkbox"/> Approve With Conditions <input type="checkbox"/> Deny	Date 9/4/97	Date Received 8/28/97
Signature <i>D. Jennifer Sajna</i>		Date Due 9/11/97
COMMENTS:		

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 11th Floor
P.O. Box 7858
Madison, WI 53707-7858
Telephone 608/267-1125

1 Applicant Agency Dept. of Workforce Development		2 CFDA # 17.225	
4 Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7948 Madison, WI 53707-7948 Contact Person Bill Weber Phone 266-8220		5 Federal Agency to Receive Request U. S. Dept. of Labor	
8 Agency Project Title (Interstate Benefit Inquiry) <i>Unemployment Insurance</i>		6 Period of Funding Mo/Day/Year 9/30/97 11/30/97	7 Application Due Date Mo/Day/Year 9/18/97
11 Type of Application <input checked="" type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input type="checkbox"/> Continuation-Modified		9 Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <i>No Fed EO</i>	
12 Type of Assistance Grant <input type="checkbox"/> Formula <input checked="" type="checkbox"/> Discretionary <input type="checkbox"/> Other		10 Area of Impact Country/State Statewide	
13 Number of Years Previously Funded None		All	

14 Funding, Allotment and Position Data (including Federal indirect costs)							
Total Federal Funds Applied For				\$14,700			
Numeric		Revenue Type		New Positions		Existing Positions	
Appropriation	Source	Revenue Type	Amount	No. (FTE)	Type	No. (FTE)	Type
151	Federal	PR-F	\$ 14,660				
153	Indirect	PR-F	\$ 40				
			\$				
			\$				
			\$				
			\$				
			\$				
			\$				

15 Indirect Cost Reimbursement
 Yes Rate 1.0% Base \$4,000 Amount \$40 No

15 Authorizations <input checked="" type="checkbox"/> Delegated Review	Authorized Agency Representative (Type or Print) Bill Weber	Title if other than Agency Secretary Budget Analyst
	Signature <i>Bill Weber</i>	Date 9/18/97

FOR DEPARTMENT OF ADMINISTRATION USE ONLY

Reviewing Analyst: *Peter Maternowski* Phone: *4-8259* SAI Number: *WF 970924-21*
 Recommendation: Approve Approve With Conditions Deny Date Received: *9-24-97*
 Signature: *[Signature]* Date: *10-7-97* Date Due: *Sept*

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

<p>1 Applicant Agency Dept. of Workforce Development</p>	<p>2 CFDA # 17.002</p>																																																																																				
<p>4 Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Sue Huss Phone 266-3338</p>	<p>5 Federal Agency to Receive Request U. S. Department of Labor</p> <p>6 Period of Funding Mo/Day/Year 10/01/97 09/30/98</p> <p>7 Application Due Date Mo/Day/Year 08/16/97</p>																																																																																				
<p>10 Agency Project Title BLS Basic Grant <i>Labor Force Stats.</i></p>	<p>9 Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <i>No Fed EO</i></p> <p>11 Area of Impact Counties/Stater Statewide</p>																																																																																				
<p>11 Type of Application <input type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input checked="" type="checkbox"/> Continuation-Modified</p>	<p>12 Type of Assistance Grant <input type="checkbox"/> Formula <input checked="" type="checkbox"/> Discretionary Other</p>																																																																																				
<p>13 Number of Years Previously Funded more than 6 years</p>	<p>All</p>																																																																																				
<p>14 Funding, Allotment and Position Data (including Federal indirect costs) Total Federal Funds Applied For <u>\$1,463,012</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Numeric Appropriation</th> <th rowspan="2">Source</th> <th rowspan="2">Revenue Type</th> <th rowspan="2">Amount</th> <th colspan="2">New Positions</th> <th colspan="2">Existing Positions</th> </tr> <tr> <th>No. (FTE)</th> <th>Type</th> <th>No. (FTE)</th> <th>Type</th> </tr> </thead> <tbody> <tr> <td>E1 (151)</td> <td>Federal</td> <td>PR-F</td> <td>\$ 1,457,526</td> <td></td> <td></td> <td>16.10</td> <td>Perm</td> </tr> <tr> <td>E3 (153)</td> <td>Federal</td> <td>PR-F</td> <td>\$ 5,486</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Numeric Appropriation	Source	Revenue Type	Amount	New Positions		Existing Positions		No. (FTE)	Type	No. (FTE)	Type	E1 (151)	Federal	PR-F	\$ 1,457,526			16.10	Perm	E3 (153)	Federal	PR-F	\$ 5,486								\$								\$								\$								\$								\$								\$								\$				
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<p>15 Indirect Cost Reimbursement <input checked="" type="checkbox"/> Yes Rate 1% Direct Salary Base \$548,152 Amount \$5,486 <input type="checkbox"/> No</p>																																																																																					
<p>16 Authorizations <input checked="" type="checkbox"/> Delegated Review</p>	<p>Authorized Agency Representative (Type or Print) Susan Huss Signature <i>Susan Huss</i> Date 8/21/97</p> <p>Title if other than Agency Secretary Budget Analyst</p>																																																																																				

FOR DEPARTMENT OF ADMINISTRATION USE ONLY

Reviewing Analyst *Peter Materanski* Phone *4-8259* SAI Number *WE970826-230*
 Recommendation: Approve Approve With Conditions Deny Date Received *8-26-97*
 Signature _____ Date _____ Date Due *Dec.*
 COMMENTS: _____

OC
X

WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration
Form DOA-7020 (R 5-88)
(Formerly FDA 50)

Federal-State Relations Office
101 S. Webster St., 6th Floor
P.O. Box 7868
Madison, WI 53707-7868
Telephone 608/267-2125

*Dislocated Workers
Employment & Training Asst. -*

<p>1 Applicant Agency Dept. of Workforce Development</p> <p>4 Address (Street/City/State/Zip) 201 E. Washington Ave., P. O. Box 7946 Madison, WI 53707-7946 Contact Person Sue Huss Phone <i>6-3338</i></p> <p>8 Agency Project Title National Reserve Funds to serve workers in 5 businesses in the Milwaukee metropolitan area of Wisconsin.</p> <p>11 Type of Application <input checked="" type="checkbox"/> New Grant <input type="checkbox"/> Amendment to Current Grant <input type="checkbox"/> Continuation-Unchanged <input type="checkbox"/> Continuation-Modified </p> <p>13 Number of Years Previously Funded 0</p>	<p>2 CFDA # 1 7 . 2 4 6</p> <p>5 Federal Agency to Receive Request U. S. Dept. of Labor</p> <p>6 Period of Funding Mo/Day/Year 5/15/97 6/30/98</p> <p>7 Application Due Date Mo/Day/Year Continuous RFP</p> <p>9 Executive Order 12372 Review Required <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Clearinghouses: Notified Dates <i>No Fed EO</i> </p> <p>10 Area of Impact Counties/States Milwaukee <i>SEWR</i> Waukesha Ozaukee Washington</p>
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14 Funding, Allotment and Position Data (including Federal indirect costs)
Total Federal Funds Applied For \$1,210,524

Appropriation	Source	Revenue Type	Amount	New Positions		Existing Positions	
				No. (FTE)	Type	No. (FTE)	Type
152	Federal	PR-F	\$ 1,193,208				
145	Federal	PR-F	\$ 13,105			.24	Perm.
153 -Indirect	Federal	PR-F	\$ 4,211				
			\$				
			\$				
			\$				
			\$				
			\$				
			\$				

15 Indirect Cost Reimbursement
 Yes Rat .5% of Salaries Base \$842,166 Amount \$4,211 No

16 Authorizations
 Delegated Review
 Authorized Agency Representative (Type or Print) Sue Huss
 Signature *Sue Huss*
 Title if other than Agency Secretary Budget Analyst
 Date 4/14/97

FOR DEPARTMENT OF ADMINISTRATION USE ONLY

Reviewing Analyst *Peter Maternowski* Phone *4-8259* SAI Number *WI970430-101*
 Recommendation: Approve Approve With Conditions Deny Date *4-30-97*
 Signature _____ Date _____ Received *5-14-97*
 COMMENTS: _____ *Del*

Comments Continued on Reverse or on a Separate Sheet

5-1-97 to PM