

ATTACHMENT K: BUDGET

LINE ITEM	Total Amount
WORK EXPERIENCE COSTS	
Paid Work Experience (Participant Wage Worksheet)	\$ -
Participant Fringe (Participant Wage Worksheet)	\$ -
Work Experience Staff Labor (Staff Chart)	\$ -
Total Work Experience Costs	\$ -
Work Experience as % of Budget	0.0%
PROGRAM COSTS	
Personnel	
Staff Salaries (Staff Chart)	\$ -
Fringe Benefits (Staff Chart)	\$ -
Total Program Personnel (Non WEX)	\$ -
Staff Travel	\$ -
Facilities (Facilities Worksheet)	\$ -
Supplies	\$ -
Participant Training	\$ -
Participant Support	\$ -
Participant Stipends	\$ -
Other Direct Costs (Miscellaneous): list each cost not included in other lines; provide brief details and cost calculations.	
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
	\$ -
Total Miscellaneous	\$ -
Profit	\$ -
General Overhead/Administration or Indirect	\$ -
TOTAL - ALL COSTS	\$ -

FACILITIES WORKSHEET

Budget period in months:

Space Costs

Facility Address	Rented (Yes/No)	Owned (Yes/No)	Total square feet of facility	Cost per square foot per year ¹	# of months used by program	Square feet used by program	Total Cost to program	Percent of facility used by program
							\$0.00	0.00%
							\$0.00	0.00%
							\$0.00	0.00%
Total Facility Costs							\$0.00	

¹ Generally, payment schedules under standard businesses leases are based on a price per square foot per year. If there is a different payment schedule for the facility, please convert the cost to the price per square foot per year. The cost per square foot is used to determine that the facility cost is reasonable in the local real estate market.

Example 1: Payment is \$1,000 per month for 1,000 sq. ft. Annual cost is 12 x \$1,000 = \$12,000. Price per square foot is \$12,000/1,000 = \$12 per sq. ft.

Example 2: Payment is \$55,000 per year for 2,000 sq. ft. Price per square foot is \$55,000/2,000 = \$27.50 per sq. ft.

Utilities and Related Costs - for each facility

Facility Address	Monthly Electricity	Monthly Heat	Monthly Cleaning/Maintenance	Other Monthly Cost/describe in budget narrative	Other Monthly Cost/describe in budget narrative	Total monthly cost	Percent used by program	Total Cost to program
0						\$0.00		\$0.00
0						\$0.00		\$0.00
0						\$0.00		\$0.00
Total Utilities Costs						\$0.00		\$0.00

Technology Costs

List phone/fax lines, cell phones ¹ , internet ² , leased/rented office equipment	# of devices or users	Monthly cost per device	# of months used by program	Percent used by program	Total Cost to program
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
Total					\$0.00

¹ Staff with cell phones must be listed by name.

² Calculation of program's share of internet charges may be based on users, including participants.

³ Equipment, such as copiers, networked printers, and postage machines, that is leased should be listed here.

Summary:	
Total Space	\$0.00
Total Utilities	\$0.00
Total Communications	\$0.00
Total Facilities	\$0.00

PARTICIPANT WAGE WORKSHEET

WAGES	# of positions	# of weeks per position	# of hours per week	wage/hour	Total Wages	Fringe Rate	Total Fringe	Total Participant Costs
Participants					\$0.00	0.00%	\$0.00	\$0.00
Participants					\$0.00	0.00%	\$0.00	\$0.00
Participants					\$0.00	0.00%	\$0.00	\$0.00
Participants					\$0.00	0.00%	\$0.00	\$0.00
Total Participants	0			TOTAL WAGES:	\$0.00	TOTAL FRINGE:	\$0.00	\$0.00

FRINGE BENEFITS	Rate
FICA	
Workers Compensation	
UI (where applicable)	
Total Fringe Rate	0.00% Apply to total wages.

