



**Job Training and Economic
Development Program(JTED)**

Request for Proposal Orientation

**Illinois Department of Commerce and
Economic Opportunity**

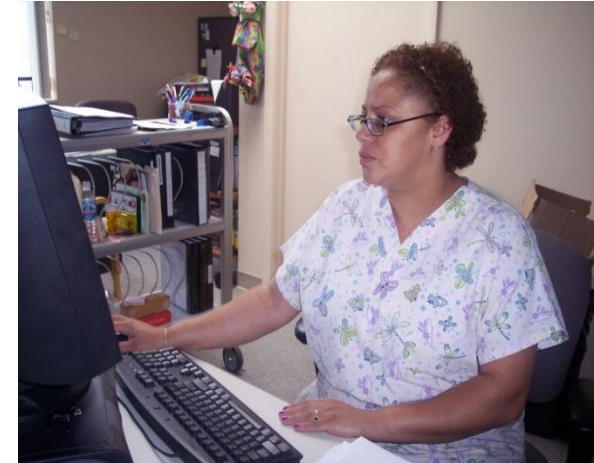
Pat Quinn, Governor

Warren Ribley, Director

JTED

**Providing Careers for Individuals*

** Meeting Local Industries Workforce Shortages*



Meeting Discussions

- Program Description
- Program Requirements
- Sector Strategy Initiative
- Application Requirements
- Submission Form
- Selection Criteria

Program Goals

- Foster local economic development by linking the needs of the *low wage/low skilled employed worker* with the workforce needs of local industry. (Category I)
- Foster local economic development by linking the needs of the *unemployed disadvantaged individual* with the workforce needs of local industry. (Category II)

Job Training and Economic Development Grant Program is authorized under Public Law 90-474 (20 ILCS 605/605-415)

Eligible Applicants

- *Not-for-profit organization*
- *Have a local board of directors*
- *Directly provides job training services*
- *Has a history in serving low-wage/low-skilled workers and/or disadvantaged persons*

Eligible applicants are referred to as Community-Based Providers (CBP) by the JTED Act.

Program Categories

- JTED funds two program categories

(Grants will not be awarded to the same organization for both categories)

- Category I

- Industry-linked training for low-wage/low-skilled employed workers or newly hired disadvantaged persons.

- Category II

- Industry-linked training for unemployed disadvantaged individuals.

Program Category I

Low Wage/Low Skilled Workers

- **Program Activities**
 - Partner with local employers in need of skilled workers.
 - Identify employees unable to advance in their career due to inadequate skills.
 - Develop the curricula and implement the training that meets the needs of the industry/employer
 - Follow-up on training results

Program Category I

Low Wage/Low Skilled Workers

- **Program Outcome**
 - Increase the skill level of the participant.
 - Increase in earning for the participant.
 - Provide opportunities for job advancement and the capacity to move up a career path.
 - Increase capacity/productivity for employer.
- **Eligible Participants**
 - Low-wage/low-skilled workers are workers who earn an hourly wage (or equivalent) equal to or less than 175% of the Federal Poverty Level for a family of three.

Program Category I

Low Wage/Low Skilled Workers

- A client has to have an hourly wage of \$16.68 or less to be eligible.
- 2008 HHS POVERTY GUIDELINES FOR DETERMINATION OF 175% POVERTY

Size of Family Unit	Annual 100% Poverty	Annual 175% Poverty
1	\$10,830	\$18,953
2	14,570	\$25,498
3	18,310	\$32,043
4	22,050	\$38,588
5	25,790	\$45,133
6	29,530	\$51,678
7	33,270	\$58,223
8	37,010	\$64,768
For each additional person add	3,740.00	\$6,545

<http://aspe.hhs.gov/poverty/09poverty.shtml> * Based on 1920 hours Level to be updated July 1, 2010

Program Category II - Unemployed Disadvantaged Individuals

- Program Activities
 - Partner with employers and industry representatives to determine industry skill shortages and employer needs for a trained workforce.
 - Assess the employment barriers of local unemployed disadvantaged persons.
 - Develop curricula and implement training that meets industry/employer needs and provides required skills to disadvantaged persons.

Program Category II - Unemployed Disadvantaged Individuals

- Program Outcome
 - Meet Industry needs for skilled workforce.
 - Increase the skill level of the participant.
 - Place participant into a job in the industry.
 - Participant retains the job for 90 consecutive days or 150 non consecutive days.
 - Provide opportunities for job advancement and the capacity to move up a career path.

Program Category II - Unemployed Disadvantaged Individuals

- Eligible Participants

Disadvantaged individuals are defined as individuals who are between the ages of 16 and 72, and at least one of the following:

- receives, or is a member of a family which receives, cash welfare payments under a federal, state, or local welfare program; OR
- has, or is a member of a family which has, received a total family income for the six month period prior to application for the program involved (exclusive of unemployment compensation, child support payments, and welfare payments) which, in relation to family size, was not the excess of 70% of the lower living standard income level; OR

Program Category II - Unemployed Disadvantaged Individuals

- Eligible Participants (continued)
 - is receiving, or has been determined, within the last six month period prior to the application for the program involved, to receive, food stamps pursuant to the Food Stamp Act of 1977; OR
 - qualifies as a homeless person under subsection (a) and (c) of section 103 of the Stewart B. McKinney Homeless Assistance Act; OR
 - is an individual with a disability whose own income meets the requirements above, but who is a member of a family whose income does not meet such requirements.

Program Category II - Unemployed Disadvantaged Individuals

- Eligible Participants (continued)

INCOME GUIDELINES FOR DETERMINATION OF LOW INCOME STATUS 70% of Lower Living Standard Income Level (LLSIL)

These Guidelines are in effect From: June 16, 2008 To: May 11, 2009				These Guidelines are in effect From: May 12, 2009 To: Continuing			
Size of Family Unit	LWIAs 1, 2, 5, 6, 7, 8, 9, 10	LWIAs 22 and 24	LWIAs 3, 4, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 23, 25, 26	Size of Family Unit	LWIAs 1, 2, 5, 6, 7, 8, 9, 10	LWIAs 22 and 24	LWIAs 3, 4, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 23, 25, 26
1	\$ 10,400	\$ 10,400	\$ 10,400	1	\$ 10,830	\$ 10,830	\$ 10,830
2	\$ 14,526	\$ 14,000	\$ 14,000	2	\$ 14,570	\$ 14,570	\$ 14,570
3	\$ 19,935	\$ 17,746	\$ 18,880	3	\$ 19,815	\$ 18,310	\$ 18,824
4	\$ 24,611	\$ 21,904	\$ 23,309	4	\$ 24,463	\$ 22,342	\$ 23,239
5	\$ 29,045	\$ 25,850	\$ 27,504	5	\$ 28,871	\$ 26,367	\$ 27,422
6	\$ 33,970	\$ 30,227	\$ 32,172	6	\$ 33,766	\$ 30,832	\$ 32,075
For family units with more than 6 members	add \$4,700 for each additional member	add \$4,330 for each additional member	add \$4,500 for each additional member	For family units with more than 6 members,	add \$4,895 for each additional member	add \$4,465 for each additional member	add \$4,675 for each additional member

Sector Strategies Initiatives

- Initiative identifies sectors of the economy expected to drive the creation of good paying jobs.
- State targeted industries are: health care, manufacturing, transportation/distribution/logistics, information technology, and agriculture, sectors.
- Local Workforce Investment Boards may have identify local industry sectors to target.

Application Requirements

- Applicant Information
- Applicant History
- Proposal Information
- Performance Measures
- Projected Employment Impact
- Budget
- Program Specific Information
- Applicant Certification

Proposal Information (3.3)

- Project Description:
 - Describe Training(s) to be provided
 - Concise but descriptive
 - Can be shared with general public
 - Intent defined
 - Can be used in Scope of Work

Program Specific Information

- Description of Organization and Personnel:
 - Organizations history and qualifications in administering a job training program
 - Qualifications of personnel
 - Include as attachment:
 - Not-for-profit certification
 - Board list
 - Secretary of State Certificate of Good Standing
 - W9
 - CCR

Program Specific Information

- Identify Industries, Occupations, Skills
 - Category I – Employed Low Wage/Skilled
 - Indicate the industry(ies) and occupation(s) training will be provided in.
 - Define the skill deficiencies by occupation.
 - Promotion potential and wage rate current and future.
 - Only employers with less than 250 full-time employees may participate.

Program Specific Information

- Category II – Unemployed Disadvantaged
 - Indicate the industry(ies) and occupation(s) training will be provided in.
 - Identify skills employers need and the disadvantage lack. Barriers to employment of the disadvantage.
 - Availability of positions and wage rates.

Program Specific Information

- **Local Partnerships**
 - **Employers**
 - Identification of and coordination with local employers.
 - Include partnership agreements as attachment.
 - **Other Partners**
 - Relationships with local economic development organizations, sector representatives, and training partners.
 - Include partnership agreements as attachment.
- **Employer Role**
 - Assessment
 - Curriculum
 - Training
 - Placement
 - Retention
 - Promotion

Program Specific Information

B. Training Program Format

(Use the space below to describe the Job Training Program. If more than one training program is being provided complete this form for each program.)

Training Program Name: _____

Industry(s) Served: _____

Clients Served by Benchmark:

Enrolled	Mid-Point	Completion	Employed (Category 2)	Retained	Wage/Benefit Increase (Category 1)

Program Specific Information

- Summary – (will be included in contract)
 - Concise description of the training program
 - How it meets local industry needs for skilled employees.
 - What geographic are served.
 - Is there a population targeted.
 - Results - Outcome

Program Specific Information

- Activities:

- Training

- Materials Used
- Applicable to Industry
- Who Develops Curriculum
- Type of Training
- Who Provides Training
- Where and How Long
- Expected Outcomes
- Contracting Training Providers

- Participant Intake

- Identified
- Enrolled/Co-enrolled
- Follow-up

Program Specific Information

Occupation Summary:

List the occupation, existing occupation wage rate, duration of training (hours/weeks), and average projected cost per participant required for each participant to complete the training program. (If more than one occupation is covered in this Training program, specify by occupation):

Occupation	Existing Wage Rate	Duration of Training Hours/Weeks	Average Cost per Participant

Program Specific Information

Partnerships:

List your employer partners and targeted occupations for each and any employer matching funds. List other partnerships established and any matching funds they provide to administer the training program. Matching funds can be cash or in-kind contributions.

Employer Partner Name	Occupation(s)	Employer Match

Partner Name (Local Economic Development, Sector Representatives, Training Partners)	Partner Match

Program Specific Information

- **Participant Activity Summary of Performance**

Five benchmarks have been established to track participant performance

- Number Enrolled
- Number Reaching Mid-Point
- Number Completing Training
- Number Retained Employment
- Number Employed (for Category II)
- Number Receiving a Wage and or Benefits Increase for Category I

Complete the Participant Activity Summary and Cost Allocation by Performance Measures for Appropriate Category

- **Budget and Cost Justification**

- Cost Justification
- Matching funds – source and use. (for Category I priority is given for matching funds)
- Performance Based Contract
 - 5 Benchmarks
 - 20% Allocated to each Benchmark
 - Category I – Funds requested
 - Category II – 50/50

Complete Budget Summary Form

Program Specific Information

BUDGET AND COST JUSTIFICATION

Line Item	Amount	Cost Justification
1. Personnel		
2. Fringe @ %		
3. Travel		
4. Equipment		
5. Supplies		
6. Space Costs		
7. Contractual (Direct Training)		
8. Contractual (Other Services)		
9. Other (define)		

Selection Criteria

- **Criteria used by DCEO when making funding decision:**
 - Prior performance in meeting JTED goals.
 - Prior CBP experience is serving low-wage/skilled and unemployed disadvantaged individuals.
 - Qualifications of assigned personnel.
 - Level of local employers participation.
 - Amount of match funds provided.
 - Quality of curriculum and training materials.
 - Likelihood training will result in retention/increased earnings.
 - Reasonableness of proposed costs.
 - Targeted regional identified demand occupations in industries experiences critical skills shortages.
 - Letters of support.

Grant Information

- **Performance period**
 - *The period of performance will be from June 1, 2011 through May 31, 2013.*
 - *submitted budgets should cover expenses for the same period*
 - *grantees will prepare quarterly reports*
- **Total appropriation**
 - *Approximately \$1.9 million to be awarded to selected applicants*

Review & Selection

Procedures

1. Preliminary review is completed by the grants manager to verify that the applicant is eligible and application is complete.
2. Final review is completed by DCEO workforce development staff.
3. Presentations may be required.
4. Successful respondents will be contacted to complete final negotiations.

No costs may be incurred prior to the execution of the grant without the expressed written consent of DCEO.

Submission Information

- Applicants should submit an original and three copies to:

Tammy Stone,
500 East Monroe, 10th Floor
Springfield, IL 62701

- Email Application Submission Document to:
tammy.stone@illinois.gov
- All proposals are due by end of day March 10, 2011

DCEO Contact

Tammy Stone

Program Manager

500 East Monroe

Springfield, IL 62701

(217)557-5549

tammy.stone@illinois.gov



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