

**Division of Vocational Rehabilitation and
Great Lakes Inter – Tribal Council
Innovation and Expansion Project FY 13-14**

Grantee: Great Lakes Inter-Tribal Council (GLITC)

Project Title: Place and Train:
Innovation and Expansion Project

Contact Information:
jmuse@glitc.org
(715) 292-1592

DVR Program Specialist: Linda Cottington DVR Program Specialist
Division of Vocational Rehabilitation
201 E. Washington Avenue G100
Madison Wisconsin 53703-7852
Linda.cottington@dwd.wisconsin.gov
(608) 266-0177
(608) 316-0199 (cell)

Grant Amount: \$ 116,376

Effective Dates: From: 03/01/14 To: 9/30/14

Regulatory Basis:

Consistent with the FFY14 State Plan for Vocational Rehabilitation, approved activity by the Wisconsin Rehabilitation Council the Division of Vocational Rehabilitation is issuing this grant pursuant to the following regulatory authority: **FFY 2014 Title I Chapter 1, Part B.**

This project is renewable for up to 3 years, based on employment outcome impacts associated with the GLITC services rendered. It is anticipated that for those services proven effective in achieving and maintaining DVR participant employment outcomes, a transition from project funding to fee for service agreements will occur.

Objective

Develop and implement "Place and Train" projects with mutually agreed upon Tribal businesses, to place up to 20 consumers of Wisconsin DVR or joint Wisconsin DVR-GLITC VR in competitive jobs either directly with the Tribal entity hosting the training or within the local community using their newly acquired skills and work reference. Services will include job development, soft skill training, on the job training and follow up services. Eligible consumers (with an active Wisconsin DVR case file, IEP and IRIS number) will receive wages (during soft skills training and job skill training) from Wisconsin DVR.

The following interested Tribal employers have been identified:

- Lac du Flambeau
- St. Croix
- Red Cliff
- Bad River

Major Activities: Provision of screening and training of Wisconsin DVR consumers for a wide variety of jobs. Candidates will receive this training at the host Tribal entities job site.

1. GLITC staff will develop Soft Skill curriculum and assist with recruitment of candidates for the projects.
2. Develop protocols for project (goals, mission and Tribal education).
3. GLITC and DVR will identify potential referrals to the Place and Train project(s).
4. GLITC staff will refer potential consumers to Wisconsin DVR to achieve DVR eligibility for services and a timely determination OOS category determination (to allow for a possible waiting list time due to OOS category before development of a DVR IPE (Individualized Plan for Employment)).
5. GLITC will provide initial screening of candidates prior to contacting the Tribal employer.
6. Trainees will have included in their DVR IEP wages for Soft Skills (Temporary Work Experience category) and for Hard Skills (paid Internship). Both will be processed through the statewide Employer of Record.
7. GLITC staff will provide an agreed upon specific curriculum of soft skills to successful candidates -estimated two to three weeks for each consumer (TWE or Trial Work Experience).
8. Following soft skills training, trainees will begin hard skills training (Internship). Estimated time is 60-90 days, depending on the size of the cohort of consumers and skill level entering the hard skill training phase.
9. When the trainee has completed the agreed upon training period, the employer will be given the opportunity to place this consumer on payroll and in a permanent position.
10. Follow up services with the consumer and employer will continue until a successful closure is filed.
11. If the Tribal employer does not hire the candidate, job placement services will be provided.

Outcome Measures and Reporting:

Consumer Measures and Reporting –

- Reports (monthly to referring VRC counselor and quarterly to Project Specialist) will include number of participants who complete Soft Skills Training and those who complete Hard Skills Training (include consumer name and DVR IRIS number).

- Reports will also include number of participants hired at the host business and number of participants hired in a different business, using the skills learned in this training.(include consumer name and DVR IRIS number).
- GLITC will provide 1 Job Training Specialist, Supervisory Oversight (Deputy Director @ 20%) and administrative support (Deputy Director Assistant @ 20%).
- For each Wisconsin DVR or joint GLITC/Wisconsin DVR consumer served, monthly reports will be submitted to DVR.

Project Measures and Reporting –

- GLITC will complete attached Quarterly Attainment Form (attached). Progress toward the stated goals is to be reported on the form for review and discussion at required quarterly project meetings.
- Each Tribal site will be identified in invoices and reports.

Reporting and Billing Requirements

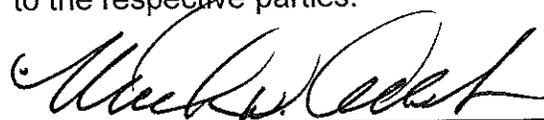
- Invoices will be accepted monthly and are due by the 10th day of each month. Invoices should reflect actual expenditures for services rendered.
- Invoices are to be submitted electronically to the DVR Budget and Policy Analyst, Lenn Schneider; lenn.schneider@dwd.wisconsin.gov **Misdirected invoices will not be processed.**
- Reports are to be submitted electronically to the DVR Program Specialist, Linda Cottington, Linda.cottington@dwd.wisconsin.gov.

GLITC shall retain financial records, statistical records, and all supporting documents and records pertaining to this contract, adequate to document the accuracy of the information and statements, for a period of seven (7) years.

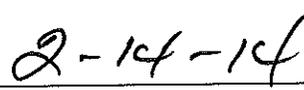
GLITC will provide DVR with an annual audit, in accordance with federal and state audit requirements.

Procedures for changes

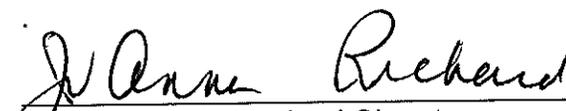
Requested changes can be made in writing to the DVR Program Specialist (Linda Cottington) for consideration. Amendments to the agreement will be made on a case by case basis. Changes in contact information should be provided electronically via email to the respective parties.



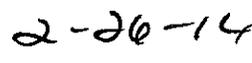
 Jeff Muse
 VRNA Deputy Director
 Vocational Rehabilitation for Native Americans



 Date



 Signature – Authorized Signature
 Division of Vocational Rehabilitation



 Date

Attachments: A-GLITC. Budget Estimate
B-Narrative Proposal
C-Quarterly Attainment Form
D-Standard Terms and Conditions
E-Certification Regarding Debarment, Suspension and other Responsibility Matters
F-Certification Regarding Drug-Free Workplace Requirements
G-Certification Regarding Lobbying

Project Title: Job Training Specialist

Operational Budget for FFY 2014 (7 months)	\$116,376
Income	
DVR Contract	
Miscellaneous other	
Expenses	
1. Personnel	\$49,308
2. Fringe	\$19,723
3. Travel	\$11,669
4. Equipment	0
5. Supplies & Publications	\$4,000.00
6. Contractual and Training <i>(a) Registration Costs</i> <i>(b) Contracts</i> <i>(c) Collaborations</i>	
Total	\$5,000.00
7. Construction	0
8. Other: (provide description)	\$2,722
9. Total Direct Costs	
10. Indirect Costs (@ 34.7% of salary and fringe))	\$23,954
11. Training Stipends	0
12. Total Project Costs	\$ 116,376
13. Per DVR Consumer cost estimate	
Other:	

Narrative Explanation of Budget items:

Since GLITC is run strictly on soft funds or Grants, there is no base for infrastructure. Historically, we operate our central administration based on a pre-authorized (by the federal office of the Inspector General) Indirect cost rate that is charged to all funded programs. This rate is based on the salary and fringe paid to our employees. The funds captured pay for the administration of GLITC. This includes:

Salaries of our Executive Director and his Executive Assistant, our receptionist, Informational Technology staff, Human Resources and Accounting staff. It also covers payroll costs, equipment and administrative travel, Servers for the computers and licenses. It also pays for our annual audit, which is required by law for us to maintain our 501c3 status.

Personnel: Funds 1.0 FTE for Job Training Specialist, .2 FTE for Deputy Director who will provide supervisory and administrative oversight, and .2 FTE for Deputy Director Assistant who will provide administrative support and assistance.

Fringe: 40 percent of salary.

Travel: Includes travel during the year to tribal sites, 156 miles to Red Cliff @ .565 per mile, 140 to Bad River @.565 per mile plus per diem of 13.50 for breakfast and/or lunch. Includes travel to DVR sites as necessary. Also includes training travel and Deputy Director travel to facilitate start of Program.

Supplies and Publications: Includes \$2,000 for computer, and\$ 2,000 for office supplies, including program brochures.

Contractual and Training: Training costs for acclimating to new job, and attending outside cultural and content training as necessary. This includes the annual Consortia of Administrators for Native American Rehabilitation (CANAR) conference and the Rehabilitation for Wisconsin training conference (RFW).

Other: Includes copies, telephone, space and postage costs.

Indirect Costs: 34.7 percent of salary and fringe as established by the US Inspector General's office.

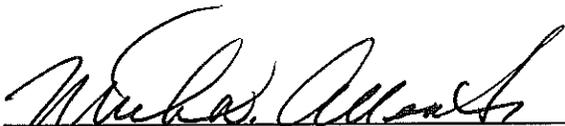
**CERTIFICATION REGARDING LOBBYING
As Defined In 34 CFR Part 82**

Certification for Agreements, Contracts, Grants, and Loans

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of congress, an officer or employee of Congress, or an employee of a Member of congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, US Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.



Signature – Provider Authorized Representative

2-14-14

Date

Printed Name And Title Of Authorized Representative

Provider Name

DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET

0348-0046
(cont.)

Reporting Entity: _____ Page _____ of _____

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Use the SF-LLL-A Continuation Sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks (Subawardee), then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influence the covered Federal action.
(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. Enter the amount of compensation paid or reasonable expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check the appropriate box(es). Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate box(es). Check all boxes that apply. If other, specify nature.
14. Provide a specific and detailed description of the services that the lobbyist has performed, or will be expected to perform, and the date(s) of any services rendered. Include all preparatory and related activity, not just time spent in actual contact with Federal officials. Identify the Federal official(s) or employee(s) contacted or the officer(s), employee(s), or Member(s) of Congress that were contacted.
15. Check whether or not a SF-LLL-A Continuation Sheet(s) is attached.
16. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.

**CERTIFICATION REGARDING
DEBARMENT, SUSPENSION, AND
OTHER RESPONSIBILITY MATTERS**

As required by Executive Order 12549, Debarment and Suspension, and implemented at 34 CFR Part 85, for prospective participants in primary covered transactions, as defined 34 CFR Part 85, Sections 85.105 and 85.110-

**(Before Completing Certification, Read Attached Instructions
Which are An Integral Part Of The Certification)**

1. The applicant certifies that it and its principals:
 - (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - (b) Have not within a three-year period preceding this application been convicted or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
 - (d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and
2. Where the applicant is unable to certify to any of the statements in this certification he or she shall attach an explanation to this application.



Signature - Provider Authorized Representative

2-14-14
Date

Printed Name And Title Of Authorized Representative

Provider Name

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.
2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms *covered transaction*, *debarred*, *suspended*, *ineligible*, *lower tier covered transaction*, *participant*, *person*, *primary covered transaction*, *principal*, *proposal*, and *voluntary excluded*, as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.
6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.
7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Nonprocurement Programs.
9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

**CERTIFICATION REGARDING
DRUG-FREE WORKPLACE REQUIREMENTS (GRANTS)
As Defined In 34 CFR Part 85**

Grantees Other Than Individuals

- A. The grantee certifies that it will or will continue to provide a drug-free workplace by:
- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
 - (b) Establishing an ongoing drug-free awareness program to inform employees about-
 - (1) The dangers of drug abuse in the workplace;
 - (2) The grantee's policy of maintaining a drug-free workplace;
 - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
 - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
 - (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
 - (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will-
 - (1) Abide by the terms of the statement; and
 - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
 - (e) Notifying the agency in writing, within ten calendar days after receiving notice under paragraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
 - (f) Taking one of the following actions, within 30 calendar days of receiving notice under paragraph (d)(2), with respect to any employee who is so convicted-
 - (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
 - (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;
 - (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code):

Check if there are workplaces on file that are not identified here.

Grantees Who Are Individuals

- (a) The grantee certifies that, as a condition of the grant, he or she will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant;
- (b) If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, he or she will report the conviction, in writing, within 10 calendar days of the conviction, to every grant officer or other designee, unless the Federal agency designates a central point for the receipt of such notices. When notice is made to such a central point, it shall include the identification number(s) of each affected grant.


Signature – Provider Authorized Representative


Date

Printed Name And Title Of Authorized Representative

Provider Name

