**ATTACHMENT B – BUDGET SAMPLE**

**Budget Request $** Enter Amount here.

**Cash Matching Funds $** Enter Amount here.

**Value of In-kind Services $** Enter Amount here.

**Total $** Enter Amount here.

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| **BUDGET CATEGORY** | **AMOUNT** | **NARRATIVE** |
| **Program Staff Salaries** (position title/staff function assigned to specific program activities, salary/wage, time charged to project) | **$** | Enter brief narrative here. |
| **Program Staff Fringe Benefits** (type and cost of fringe benefits for each position included in project budget) | **$** | Enter brief narrative here. |
| **Surveys/Assessments** (survey or sector/employer assessment fees and costs detailed by type of activity, cost per and number of) | **$** | Enter brief narrative here. |
| **Staff Development/Training** (consultant details; tuition/fees, other costs related to providing/attending training to partner staff) | **$** | Enter brief narrative here. |
| **Employer Outreach and Services** (details of employer outreach activities; fees for employer services) | **$** | Enter brief narrative here. |
| **Travel** (costs of mileage, lodging and meals for staff and consultants) | **$** | Enter brief narrative here. |
| **Advertising, Public Relations** (media advertising details and other outreach costs, e.g., newspapers, radio/TV, direct mail, etc.) | **$** | Enter brief narrative here. |
| **Communications, Publications and Printing** (details of phone, IT services, other costs, printing and/or purchase of books, magazines, brochures, etc.) | **$** | Enter brief narrative here. |
| **Materials and Supplies** (office supplies, other as needed) | **$** | Enter brief narrative here. |
| **Facilities** (conference/meeting space, etc., detailed by type activity and related project facility costs) | **$** | Enter brief narrative here. |
| **Administration** (direct staff cost, other costs associated with planning, coordinating, monitoring and reporting project activities.**Not to exceed 5 percent of funding.**) | **$** | Enter brief narrative here. |
| **Training Costs** (include any direct costs of participant training program not covered under any of the above categories) | **$** | Enter brief narrative here. |
| **Other** (other costs not included in the above line required to implement the project that may be included as a grant-funded item) | **$** | Enter brief narrative here. |