

**SUB-RECIPIENT FUNDING AGREEMENT BETWEEN  
FOND DU LAC TRIBAL AND COMMUNITY COLLEGE  
AND  
CITY OF DULUTH  
FOR THE  
STATE OF MINNESOTA  
DEPARTMENT OF EMPLOYMENT AND ECONOMIC DEVELOPMENT  
WORKFORCE DEVELOPMENT DIVISION  
  
PATHWAYS TO PROSPERITY  
BRIDGE TO HEALTHCARE CAREERS  
SFY 2024 and SFY 2025**

**THIS AGREEMENT**, is by and between the **CITY OF DULUTH**, (the "City"), and **FOND DU LAC TRIBAL AND COMMUNITY COLLEGE**, (the "Grantee").

**WHEREAS**, the City has entered into a Master Grant Agreement with the State of Minnesota, acting by and through its Department of Employment and Economic Development, Workforce Development Division ("DEED") to apply for and receive funds to provide employment and training services offered through the City's Workforce Development Department; and

**WHEREAS**, under the Master Grant Agreement, in cooperation with Grantee, the City applied to and received approval for three grant funds in the amount totaling Eight Hundred Seventy-Five Thousand Dollars and No/100s (\$875, 000.00) from DEED under its Pathways to Prosperity Program (the "Program Grant") to support workforce needs in key industries and address employment disparities in Duluth, and St. Louis, Lake, Carlton and surrounding Counties. This program will prepare individuals with the skills needed to enter into employment in high demand occupations and/or access additional education ("the Project"). The Project Specific Plan ("PSP)/Work Plan/Budget are attached as *Exhibit B*; and

**WHEREAS**, the City desires to award a portion of the Program Grant (the "Subgrant") to Grantee, and Grantee agrees to accept and utilize such proceeds for the Project.

**NOW, THEREFORE**, the parties agree to the following terms:

**1. AWARD.** The City awards a Subgrant to Grantee in the amount totaling Sixteen Thousand Seven Hundred Thirty-Six Dollars and No/100s (\$16,736.00) for Grantee's performance of its obligations under the Program Grants including:

- Bridge to Healthcare Careers: State Fiscal Year (SFY25); funding totaling Sixteen Thousand Seven Hundred Thirty-Six Dollars and No/100s (\$16,736.00).

State Fiscal Year 2025 (SFY25) funding will be available beginning July 1, 2024 through June 30, 2025.

- A. Perform the duties specified in the PSP/Work Plan/Budget for each of the one P2P grant: Bridge to Healthcare Careers attached as *Exhibit B*; and incorporated into this Agreement.

- B. Achieve the specific enrollment, training completion, and placement targets for each grant outlined in the P2P PY24-25 Performance Goals, attached as *Exhibit D*.
- C. Fulfill the roles and responsibilities as outline in the P2P Partner Roles and Responsibilities Summary, *Exhibit E*.
- D. Follow all DEED policies and procedures.
- E. Submit invoices outlining services provided with all supportive documentation to City Director as described in section 5. Examples of documentation for services include detailed receipts and timesheets.
- F. Coordinate with City staff on scheduling for services and/or workshops.
- G. If applicable and as requested, provide evaluations, attendance and completion information for services, trainings or workshops.
- H. Facilitate City’s Fiscal and Program Monitoring as outlined in the P2P Sub-Recipient Monitoring Schedule, as attached as *Exhibit F*; and assist in the completion of the DEED Pathways to Prosperity Monitoring Guide - Example, attached hereto as *Exhibit G*.
- I. Fiscal sub-recipient monitoring will be conducted once per state fiscal year (“SFY”). Program monitoring will be conducted once per quarter.
- J. Submit the completed Grantee Obligations Acknowledgement Checklist, attached as *Exhibit H*.
- K. Develop and maintain ongoing communication with City staff.
- L. Participate in outreach and recruitment efforts.
- M. Complete work at the direction of the Duluth Workforce Development Director.

Notwithstanding anything to the contrary, the Grantee understands and agrees that any reduction or termination of the Program Grant may result in a like reduction or termination of the Subgrant, and that any material change in the timeline or scope of the Program must be approved in writing by the City and DEED. The City reserves the right to cancel or postpone training class start dates due to lack of enrolled participants or other circumstances.

**2. PERFORMANCE.** The Grantee must comply with all requirements applicable to the City in the Master Grant Agreement and/or Project Specific Plan. Grantee’s default under the Project Specific Plan will constitute noncompliance with this Agreement. If the City finds that there has been a failure to comply with the provisions of this Agreement or that reasonable progress on the Program has not been or will not be made, the City may act to protect its interests, including refusal to disburse additional funds and requiring the return of all or part of the funds already disbursed. If action to correct substandard performance is not taken by the Grantee within 60 calendar days (or such longer period specified by the City) after written notice by the City, the City may terminate this Agreement.

**3. TIME OF PERFORMANCE.** Grantee may start the Program and begin incurring Program costs on the effective date of the City’s Pathways to Prosperity Program grant agreement with DEED, and complete the Program for SFY2024-2025 on or before June 30, 2025. The City is not obligated to pay for any Program costs incurred after that date or any earlier termination, whichever occurs first. The term of this agreement may be extended as approved by DEED on substantially the same terms as set forth herein by mutual written consent of the authorized representatives of the parties. Nothing herein guarantees any such renewal.

**4. CONDITIONS PRECEDENT TO DISBURSEMENT.** The following requirements are conditions precedent to the City's disbursement of any of the Subgrant proceeds.

- A. The Grantee must have provided the City with evidence of compliance with the insurance requirements of Section 7(G) herein.
- B. The Grantee must have provided to the City such evidence of compliance with all of the provisions of this Agreement as the City may reasonably request.

**5. DISBURSEMENT.** It is expressly agreed and understood that the City will pay Grantee under this Agreement Eight Thousand Three Hundred Sixty-Eight Dollars and No/100s (\$8,368.00) in the SFY 2024, and upon receipt of SFY25 funding, Eight Thousand Three Hundred Sixty-Eight Dollars and No/100s (\$8,368.00) in SFY 2025 with the total amount not to exceed Sixteen Thousand Seven Hundred Thirty-Six Dollars and No/100s (\$16,736.00). Grantee’s proposed budget is outlined in the P2P SFY 2024 and SFY 2025 Budget, attached as **Exhibit I**. If the total funding allocation remains unchanged, Grantee may change how funds are allocated within the budget categories listed in **Exhibit I** with the prior written approval of the Workforce Development Director. Invoices, using **Exhibit J**, must be submitted on a monthly basis or other timeframe approved in writing by the Workforce Development Director. Grantee’s RPR – Reimbursement Payment Request and Performance Outcomes (Invoice Template Example), is attached as **Exhibit J**. A final invoice must be received by July 31, 2025. Payment for services will be sent within 45 days of receipt of invoice.

**6. NOTICES.** Communication and details concerning this Agreement must be directed to the following Agreement representatives:

**City:** City of Duluth  
Elena Foshay, Director  
Workforce Development Department  
402 W. 1<sup>st</sup> Street  
Duluth, MN 55802  
218-730-5241  
[efoshay@duluthmn.gov](mailto:efoshay@duluthmn.gov)

**GRANTEE:** Fond Du Lac Tribal and Community College  
Attn: Anita Hanson, President  
2101 14<sup>th</sup> Street  
Carlton, MN 55720  
218-879-0800; 218-879-0804  
[anita.hanson@fdltcc.edu](mailto:anita.hanson@fdltcc.edu)

**7. GENERAL CONDITIONS.**

- A. **General Compliance.** The Grantee agrees to comply with all applicable federal, state and local laws and regulations governing the project and funds provided under this Agreement.
- B. **Civil Rights Assurances.** Grantee and City, and their respective officers, agents, servants and employees, as part of the consideration under this Agreement, do hereby covenant and agree that:
  - 1. No person on the grounds of race, color, creed, religion, national origin, ancestry, age, marital status, status with respect to public assistance, sexual orientation and/or

disability shall be excluded from any participation in, denied any benefits of or otherwise subjected to discrimination with regard to the services provided under this Agreement.

2. That all activities to be conducted pursuant to this Agreement shall be conducted in accordance with the Minnesota Human Rights Act of 1974, as amended (Chapter 363), Title 7 of the U.S. Code and any regulations and executive orders which may be affected with regard thereto.

C. **Independent Contractor.** Nothing contained in this Agreement is intended to, or may be construed in any manner, as creating or establishing the relationship of employer/employee between the parties. The Grantee will at all times remain an independent contractor with respect to the services to be performed under this Agreement. Grantee and its employees shall not be considered employees of the City and any and all claims that may or might arise under the Workers' Compensation Act of the State of Minnesota on behalf of Grantee's employees or agents while so engaged, and any and all claims whatsoever on behalf of Grantee's employees and agents arising out of employment shall in no way be the responsibility of the City. Grantee's employees shall not be entitled to any compensation or rights or benefits of any kind whatsoever from the City, including without limitation, tenure rights, medical and hospital care, sick and vacation leave, Workers' Compensation, Unemployment Insurance, disability or severance pay, and PERA.

D. **Liability.** Each party hereto agrees that it will be solely liable for any liability arising out of any acts or omissions of itself or its officers, agents, servants, employees or subcontractors in the performance of its respective obligations under this Agreement.

Nothing herein shall be deemed to create any liability on behalf of either party not otherwise existing as to such party under the provision of the Minnesota Municipality Limitation of Liability Statute, Minnesota Statute Section 466 *et. seq.*, or to extend the amount of liability of either party to amounts in excess of that specified in said Chapter.

E. **Indemnification.** Grantee will indemnify, defend, and hold harmless the City, its officers, agents, and employees, from any claims or causes of action, including attorney's fees incurred by Grantee arising from the performance of this Agreement by Grantee, or its officers, agents or employees.

F. **Workers' Compensation.** The Grantee must provide workers' compensation insurance coverage for all employees involved in the performance of this Agreement.

G. **Insurance.** Grantee shall procure and maintain continuously in force Public Liability Insurance written on an "occurrence" basis under a Comprehensive General Liability Form in limits of not less than One Million Five Hundred Thousand and No/100s (\$1,500,000.00) Dollars aggregate per occurrence for personal bodily injury and death, and limits of One Million Five Hundred Thousand and No/100s (\$1,500,000.00) Dollars for damage liability. If person limits are specified, they shall be for not less than One Million Five Hundred Thousand and No/100s (\$1,500,000.00) Dollars per person and be for the same coverages. The City shall be named as an additional insured therein. Insurance shall cover:

1. Public liability.
2. Independent contractors--protective contingent liability.
3. Personal injury.
4. Contractual liability covering the indemnity obligations set forth herein.

## 8. ADMINISTRATIVE REQUIREMENTS.

A. **Accounting Standards.** The Grantee agrees to maintain the necessary source documentation and enforce sufficient internal controls as dictated by generally accepted accounting practices to properly account for expenses incurred under this Agreement.

### B. Records.

1. *Retention.* The Grantee must retain all records pertinent to expenditures incurred under this Agreement until conclusion of the latest of (a) six years after the Grantee has completed the Program; (b) six years after the Grantee has expended all proceeds of the Subgrant; or (c) six years after the resolution of all audit findings. Records for nonexpendable property acquired with funds under this Agreement must be retained for six years after final disposition of such property. Records for any displaced person must be kept for six years after he/she has received final payment.

2. *Inspections.* All Grantee records with respect to any matters covered by this Agreement must be made available to the City, DEED or their designees at any time during normal business hours, as often as the City or DEED deems necessary, to audit, examine, and make excerpts or transcripts of all relevant data.

3. *Audits.* If requested by the City, the Grantee must have an annual financial compliance audit conducted in accordance with the City's requirements. The Grantee must submit two copies of such audit report to the City. Any deficiencies noted in such an audit report or an audit/monitoring report issued by the City or its designees must be fully resolved by the Grantee within a reasonable time period after a written request from the City. Failure of the Grantee to comply with the provisions of this paragraph will constitute a violation of this Agreement and may result in the withholding of future payments or the requirement for Grantee to return all or part of the funds already disbursed.

4. *Data Practices Act.* The Grantee must comply with the Minnesota Government Data Practices Act, Chapter 13.

5. *Close-Outs.* The Grantee's obligation to the City does not end until all closeout requirements are completed. Activities during this close-out period include: making final payments, disposing of program assets (including the return of all unused materials, equipment, unspent cash advances, program income balances, and receivable accounts to the City), determining the custodianship of records and resolving audit findings.

C. **Payments.** The City will pay to the Grantee funds available under this Agreement based upon information submitted by the Grantee and consistent with any approved budget and City policy concerning payments. Payments may be adjusted at the option of the City in accordance with advance funds and program income balances available in Grantee accounts. In addition, the City reserves the right to liquidate funds available under this Agreement for costs incurred by the City on behalf of the Grantee.

D. **Procurement.** The Grantee must maintain an inventory record of all nonexpendable personal property procured with funds provided under this Agreement. All unexpended program income must revert to the City upon termination of this Agreement.

## 9. MISCELLANEOUS.

- A. **Assignability.** The Grantee may not assign or transfer any interest in this Agreement (whether by assignment or novation) without the prior written consent of the City; provided, however, that claims for money due or to become due to the Grantee from the City under this Agreement may be assigned to a bank, trust company, or other financial institution without such approval. Notice of any such assignment or transfer must be furnished promptly to the City.
- B. **Copyright.** If this Agreement results in any copyrightable material, the author is free to copyright the work, but the City and/or DEED reserves the right to royalty-free, nonexclusive and irrevocable license to reproduce, publish or otherwise use, and to authorize others to use, the work for government purposes.
- C. **Relationship of the Parties.** It is agreed that nothing herein contained is intended or should be construed in any manner as creating or establishing the relationship of co-partners, joint ventures, or joint enterprise between the parties hereto or constituting either party as an agent, representative or employee of the other for any purpose or in any manner whatsoever.
- D. **Governing Law.** This Agreement will be governed by, and construed in accordance with, the laws of the State of Minnesota.
- E. **Counterparts.** This Agreement may be executed in two or more counterparts, each of which shall be deemed to be an original as against any party whose signature appears thereon, but all of which together shall constitute but one and the same instrument. Signatures to this Agreement transmitted by facsimile, by electronic mail in “portable document format” (“pdf”), or by any other electronic means which preserves the original graphic and pictorial appearance of the Agreement, shall have the same effect as physical delivery of the paper document bearing the original signature.

**10. ENTIRE AGREEMENT.** This Agreement contains all negotiations and agreements between City and Grantee. No other understanding, agreements or understandings regarding the Grant Agreement, or this Agreement, may be used to bind either party

IN WITNESS WHEREOF, the parties have caused this Agreement to be duly executed intending to be bound thereby.

**CITY OF DULUTH**

**FOND DU LAC TRIBAL AND  
COMMUNITY COLLEGE**

By \_\_\_\_\_  
Mayor

Attest:

\_\_\_\_\_  
City Clerk  
Date Attested: \_\_\_\_\_

Countersigned:

\_\_\_\_\_  
City Auditor

As to form:

\_\_\_\_\_  
City Attorney

By \_\_\_\_\_  
Anita Hanson

Its: President

By: \_\_\_\_\_  
Bret Busakowski

Its: EFO

#### ATTACHMENTS

**Exhibit B:** Project Specific Plan/Work Plan/Budget – P2P - Bridge to Healthcare Careers Program SFY24 & SFY25 proposal and DEED contract

**Exhibit D:** P2P PY24-25 Performance Goals

**Exhibit E:** P2P Partner Roles and Responsibilities Summary

**Exhibit F:** P2P Sub-Recipient Monitoring Schedule

**Exhibit G:** DEED Pathways to Prosperity Monitoring Guide - Example

**Exhibit H:** Grantee Obligations Acknowledgement Checklist

**Exhibit I:** P2P SFY 2024 and SFY 2025 Budget

**Exhibit J:** RPR- Reimbursement Payment Request and Performance Outcomes (Invoice Template Example)

**Exhibit B:** Project Specific Plan/Work Plan/Budget - P2P - Bridge to Healthcare Careers Program SFY24 & SFY25 proposal and DEED contract

To be included once the DEED P2P contract is finalized.





## Workforce Development

402 West First Street  
Duluth, Minnesota 55802

218-302-8400  
218-730-5952 FAX  
workforcedevelopment@duluthmn.gov

### Exhibit D

## P2P PY24-25 Performance Goals

### On-ramp

Measurable Outcome (On-ramp)	Grant Start Date through 06/30/2025
Total Enrollments	35
Total Participants Enrolled in Work Readiness Training	28
Total Participants Enrolled in On-Ramp Training	28
Total Work Readiness Certificates Attained	22
Total On-Ramp Certificates Attained	22
Exits to Employment	28
<ul style="list-style-type: none"> <li>Exits to Employment related to training industry sector(s)</li> </ul>	15
<ul style="list-style-type: none"> <li>Exits to Employment at or above \$16/hour</li> </ul>	15
Participants Exited to Bridge or Post-Secondary Programs	2
All Other Exits	5
Total Exits	35

## Exhibit D

### Bridge

Measurable Outcome (Bridge)	Grant Start Date through 06/30/2025
<b>Total Enrollments</b>	47
<b>Total Participants Enrolled in Work Readiness Training</b>	42
<b>Total Participants Enrolled in Bridge Training</b>	42
<b>Total Participants Completing Bridge Training</b>	33
<b>Total Industry Recognized Credentials Attained</b>	35
<b>Exits to Employment</b>	28
<ul style="list-style-type: none"> <li>• Exits to Employment related to training industry sector(s)</li> </ul>	24
<ul style="list-style-type: none"> <li>• Exits to Employment at or above \$16/hour</li> </ul>	24
<b>Participants Exited to Post-Secondary Programs</b>	4
<b>All Other Exits</b>	15
<b>Total Exits</b>	47

	Total Enrollment - 01/01/2024- 06/30/2025	Enrolled in training - 01/01/2024- 06/30/2025	Complete Training	Exit to Employment	Exit to Further Training/ Apprenticeship
<i>Goals</i>					
C N A - (2 cohorts)	22	20	16	13	1
TMA (LSC Regular Class)	4	4	3	0	0
Intro to Human Services (1 cohort)	12	10	8	7	1
Health Services (1 cohort)	13	12	10	8	2
<b>Total - Healthcare Bridge</b>	<b>47</b>	<b>42</b>	<b>33</b>	<b>28</b>	<b>4</b>

**Exhibit D****Individualized**

<b>Measurable Outcome (Individualized)</b>	<b>Grant Start Date through 06/30/2025</b>
<b>Total Enrollments</b>	<i>18</i>
<b>Total Participants Enrolled in Post-Secondary Training</b>	<i>18</i>
<b>Total Participants Completing Post-Secondary Training</b>	<i>11</i>
<b>Total Degree, Diploma, Certificates Attained</b>	<i>11</i>
<b>Total Experiential Learning Placements</b>	<i>14</i>
<b>Exits to Employment</b>	<i>9</i>
<ul style="list-style-type: none"><li>• Exits to Employment related to training industry sector(s)</li></ul>	<i>8</i>
<ul style="list-style-type: none"><li>• Exits to Employment at or above \$16/hour</li></ul>	<i>9</i>
<b>Participants Remained in School or Advanced Post-Secondary Programs Upon Exit</b>	<i>6</i>
<b>All Other Exits</b>	<i>3</i>
<b>Total Exits</b>	<i>18</i>

**P2P Partner Roles and Responsibilities Summary  
State Fiscal Year 24 & State Fiscal Year 25**

**Exhibit E**

<b>Role and Responsibility</b>	<b>Duluth Workforce Development</b>	<b>SOAR Career Solutions</b>	<b>Lake Superior College and Fond du Lac Tribal and Community College</b>	<b>Duluth Adult Education</b>
<b>Recruitment</b>	<p>Conduct outreach and recruitment through a variety of channels</p> <p>Conduct eligibility screening and finalize class participant list</p>	<p>Conduct outreach and recruitment through a variety of channels</p> <p>Conduct eligibility screening and finalize class participant list</p>	<p>Share information about training through available communication channels</p> <p>Refer interested individuals to DWD and/or SOAR for eligibility screening</p> <p>Provide clear guidelines for requirements/prerequisites for LSC/FdL component of training</p>	<p>Share information about training through available communication channels</p> <p>Refer interested individuals to DWD and/or SOAR for eligibility screening</p>
<b>Enrollment</b>	<p>Screen applicants and enroll participants in Bridge and Individualized through Workforce One, ensuring all required paperwork is complete and prior to incurring any expenses</p> <p>Assist students in completing LSC or FdL enrollment steps by deadline</p>	<p>Screen applicants and enroll participants in On-ramp and Bridge through Workforce One, ensuring all required paperwork is complete and prior to incurring any expenses</p> <p>Assist students in completing LSC or FdL enrollment steps by deadline</p>	<p>Clearly communicate all enrollment process steps to partners</p> <p>Ensure all students are enrolled at LSC/FdL by the start of class</p> <p>Pro-actively communicate with DWD and SOAR case managers about enrollment problems/barriers to ensure they are resolved before class starts</p>	<p>Administer CASAS Goals test prior to enrollment</p> <p>Allow class time to complete LSC/FdL enrollment steps if needed</p>

**P2P Partner Roles and Responsibilities Summary  
State Fiscal Year 24 & State Fiscal Year 25**

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<b>On-ramp Portion</b>	Refer applicants testing below a 6 <sup>th</sup> grade level on reading or math, or requiring work readiness training or basic credential training, to SOAR for On-ramp enrollment	<p>Screen and potentially enroll applicants testing below a 6<sup>th</sup> grade level on reading or math, or requiring work readiness or basic credential training</p> <p>Provide basic work readiness skill development through Mind Over Matters and CareerQuest</p> <p>Develop a plan for employer engagement and opportunities for students to connect with employers</p> <p>Develop individual plan for attainment of On Ramp Credential(s) and job goal to achieve training-related employment at \$16/hour+</p>	No role during on-ramp	Provide math, reading, and On Ramp Credential instruction to on-ramp participants (for those seeking DAE-led credential classes)
<b>Bridge Training</b>	<p>Regularly check in with students and instructors on progress and support needs</p> <p>Communicate with instructors to help track</p>	Regularly check in with students and instructor on progress and support needs	Provide DAE instructor with class outline and materials to support pre-training preparation and participate in planning for curriculum and classroom	Communicate with job counselors to help track attendance and follow up with students who are struggling in class

**P2P Partner Roles and Responsibilities Summary  
State Fiscal Year 24 & State Fiscal Year 25**

**Exhibit E**

<b>Role and Responsibility</b>	<b>Duluth Workforce Development</b>	<b>SOAR Career Solutions</b>	<b>Lake Superior College and Fond du Lac Tribal and Community College</b>	<b>Duluth Adult Education</b>
	<p>attendance and follow up with students who are struggling in class</p> <p>Develop plan for employer engagement during the classes.</p>	<p>Communicate with instructors to help track attendance and follow up with students who are struggling in class</p>	<p>integration between LSC/FdL and DAE instructors</p> <p>Track student attendance using sign-in sheets</p> <p>Communicate with job counselors to help track attendance and follow up with students who are struggling in class</p> <p>Provide effective and engaging career skills instruction in Health Services, CNA, Intro to Human Services</p> <p>Hire and provide adequate orientation and training on LSC/FdL systems and processes to LSC/FdL instructors</p> <p>Communicate TMA class dates and enrollment deadlines to DWD/SOAR</p>	<p>Provide bridge instruction as part of each training cohort</p> <p>Participate in curriculum and lesson planning coordination between LSC/FdL and DAE instructors</p> <p>Provide open lab and in class support to students to ensure learning objectives are achieved</p> <p>Assist LSC/FdL instructor in differentiating instruction to serve different students' needs</p> <p>Support individual and group work; Provide technology assistance</p> <p>Support students in developing study and test taking skills</p> <p>Assist students in catching up after an absence</p>
<p><b>Work Readiness</b></p>	<p>Provide one-on-one work readiness counseling to participants</p> <p>Assist participants in creating resumes and cover</p>	<p>Provide one-on-one work readiness counseling to participants</p> <p>Assist participants in creating resumes and cover</p>	<p>Ensure training curriculum effectively teaches skills required to succeed on the job</p>	<p>Assist in providing work readiness instruction</p>

**P2P Partner Roles and Responsibilities Summary  
State Fiscal Year 24 & State Fiscal Year 25**

**Exhibit E**

<b>Role and Responsibility</b>	<b>Duluth Workforce Development</b>	<b>SOAR Career Solutions</b>	<b>Lake Superior College and Fond du Lac Tribal and Community College</b>	<b>Duluth Adult Education</b>
	letters and addressing barriers to employment	letters and addressing barriers to employment		
<b>Job Placement</b>	<p>Identify training-related job opportunities and share with program participants</p> <p>Connect with employer partners to understand hiring processes and facilitate job applications</p> <p>Provide one-on-one job placement support to participants</p> <p>Work with LSC/FdL instructors to coordinate employer participation during training classes</p>	<p>Identify training-related job opportunities and share with program participants</p> <p>Provide one-on-one job placement support to participants</p>	Work with DWD to coordinate employer participation during training classes	n/a
<b>Grant Management</b>	<p>Provide overall budget oversight</p> <p>Convene and facilitate partner coordination meetings</p>	<p>Fulfill recruitment, enrollment, and placement goals laid out in sub recipient agreement</p> <p>Participate in partner coordination meetings</p>	<p>Actively participate in partner coordination meetings</p> <p>Assist in problem solving to ensure quality of student experience</p>	<p>Actively participate in partner coordination meetings</p> <p>Assist in problem solving to ensure quality of student experience</p>

**P2P Partner Roles and Responsibilities Summary  
State Fiscal Year 24 & State Fiscal Year 25**

**Exhibit E**

<b>Role and Responsibility</b>	<b>Duluth Workforce Development</b>	<b>SOAR Career Solutions</b>	<b>Lake Superior College and Fond du Lac Tribal and Community College</b>	<b>Duluth Adult Education</b>
	<p>Monitor performance measures and perform subgrantee monitoring</p> <p>Submit quarterly reports to DEED</p> <p>Communicate with DEED as needed regarding modifications, questions, concerns</p>	<p>Draft and submit On-ramp quarterly report to DWD</p> <p>Designate point person to manage all components of program implementation including tracking timelines and deadlines</p> <p>Assist in problem solving to ensure quality of student experience</p>	<p>Designate point person to manage all components of program implementation including tracking timelines and deadlines</p>	<p>Designate point person to manage all components of program implementation including tracking timelines and deadlines</p>







## Annual

# Administrative and Fiscal Monitoring Guide

To be completed by Employment and Training Program Providers/Grantees

Returned to the [WSCD.Notifications@state.mn.us](mailto:WSCD.Notifications@state.mn.us) e-mail account.

State Fiscal Year (SFY) ~~2022~~ Example  
Program Year (PY) ~~2021~~ Example

Minnesota Department of  
Employment and Economic Development  
Employment and Training Programs Division  
Fiscal/Monitoring Unit

Updated June 28, 2021

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## APPLICANT/GRANTEE INFORMATION

Name of person submitting the form: Enter the name of the person submitting this form.

E-mail address: Enter e-mail address.

Agency: Enter name of organization.

Date Guide Completed: Enter the date the guide was completed.

## ALTERNATIVE FORMATS

This guide is available in alternative format(s) upon request. To arrange to receive this guide in an alternative format, please contact:

**Name of Contact:** Karen Lilledahl

**E-mail:** [Karen.lilledahl@state.mn.us](mailto:Karen.lilledahl@state.mn.us)

**Phone Number:** 651-259-7089      **TTY:** 651-296-3900

## INTRODUCTION

This guide is one of the tools used to determine whether the Minnesota Department of Employment and Economic Development's (DEED) providers/grantees (referred to as grantee, moving forward) have developed and implemented sound administrative, financial and accounting strategies, policies, procedures, and systems to ensure the grantee (itself as an entity) and any subgrantees have the administrative and fiscal capacity, and financial health to carry out the activities of the grant, serve grant participants, manage the grant funds, and segregate the multiple funding sources to ensure optimal use of the grant funds. Monitoring is not only to be carried out by DEED at the grantee level, but also by the grantee at the subgrantee level.

The Annual Assessments/Local Unified Plan (as applicable), Equal Opportunity (EO) and Americans with Disabilities Act (ADA) Annual Assessment, and program monitoring reports, etc. will be reviewed as they relate to the various sections of this Guide.

## INSTRUCTIONS

Employment and Training Program (ETP) grantees are required to submit an Annual Administrative Fiscal Monitoring Guide to the Minnesota Department of Employment and Economic Development (DEED) to receive and continue to receive federal, state, and other funding.

The character field to key your answer in is depicted with instructions written in dark blue font, and a gray background will show when you hover over it.

Return this populated guide to: [WSCD.Notifications@state.mn.us](mailto:WSCD.Notifications@state.mn.us), with the following attachments, which are written in red font:

- **Liability Insurance Certificate**
- **Most recent audit report, if not on file with DEED.**
- **Inventory list of equipment and other purchases made with DEED grant funds (over \$5,000 per item).**
- **Organizational chart for the agency.**
- **Chart of accounts related to DEED's grants.**

**All sections of this guide must be completed by the grantee.**

## STAFF, COMMENTS, QUESTIONS

To be completed by the grantee.

Grantee staff completing this guide:

1. Name: Enter grantee name.  
Title: Enter grantee title.  
E-mail Address: Enter grantee e-mail address.
2. Name: Enter grantee name.  
Title: Enter grantee title.  
E-mail Address: Enter grantee e-mail address.
3. Name: Enter grantee name.  
Title: Enter grantee title.  
E-mail Address: Enter grantee e-mail address.

Comments from the provider/grantee: Enter comments.

Questions for DEED staff: Enter questions here.

If you have any questions, comments, or concerns related to this guide, please contact your monitor (as indicated in the grant Terms and Conditions), or Chris Ortega at [Chris.Ortega@state.mn.us](mailto:Chris.Ortega@state.mn.us).

## REFERENCES

### Uniform Guidance 2CFR 200

#### Subpart D:

- Standards for Financial and Program Management (200.302 to 200.303)
- Payment (200.305)
- Procurement Standards (200.318 to 200.321)
- Performance & Financial Monitoring and Reporting (200.327 to 200.328)
- Uniform Guidance 2 CFR 200 (200.33)

#### Subpart F:

- Management Decision Letters (200.66)
- Sanctions (200.505)
- Audit Findings Follow-up (200.511)
- Audit Reporting (200.515)
- Criteria for a low-risk auditee (200.520)

### Single Audit Act of 1996

#### Minnesota Office of Grants Management Policies and Statutes

- Policy 08-01: Grants Conflict of Interest
- Policy 08-03: Publicizing Grants Notices and Requests for Proposal (rev. 2012)
- Policy 08-06: Financial Review of Nongovernmental Organizations (rev.12-2016)
- Policy 08-08: Grant Payments (rev. 10-2013)
- Policy 08-10: Grant Monitoring (rev. 12-2016)

### Conflict of Interest Minnesota Statute 10A.07

#### Minnesota Data Privacy Practices

#### Salary and Bonus Limitations (if applicable)

### WIOA Part 683-Administrative Provisions Under Title 1 of the Workforce Innovation and Opportunity Act

## INTERNAL CONTROLS

Per Uniform Guidance, below is a list of required written policies and procedures. Please check the box if you have these policies and enter the most recent policy date.

Payments - (2 CFR 200.302(b)(6) and 2 CFR 200.305, **Dated:** Enter the date the policy was most recently updated.

Allowable Costs - 2 CFR 200.302(b)(7), **Dated:** Enter the date the policy was most recently updated.

## Exhibit G - Example

- Procurement - 2 CFR 200.318, **Dated:** Enter the date the policy was most recently updated.
- Competition - 2 CFR 200.319, **Dated:** Enter the date the policy was most recently updated.
- Method of Evaluation and Selection - 2 CFR 200.320, **Dated:** Enter the date the policy was most recently updated.
- Compensation-Personal Services - 2 CFR 200.430, **Dated:** Enter the date the policy was most recently updated.
- Compensation-Fringe Benefits - 2 CFR 431, **Dated:** Enter the date the policy was most recently updated.
- Employee Relocation Costs - 2 CFR 200.464, **Dated:** Enter the date the policy was most recently updated.
- Travel Costs - 2 CFR 200.474, **Dated:** Enter the date the policy was most recently updated.

1. Does the grantee have the following internal controls in place to provide reasonable assurance that grant operations will achieve the following objectives?

Effectiveness and efficiency of operations?  Yes  No

Reliability of reporting for internal and external use?  Yes  No

Compliance with applicable laws and regulations?  Yes  No

Do the policies and procedures above reflect proper segregation of duties?

Yes  No

2. Are duties for the following tasks segregated?

Recording  Yes  No

Custodian  Yes  No

Authorizing  Yes  No

Reconciliation  Yes  No

If not, do you have compensating controls in place to mitigate the internal control risk?

Yes  No

**Note:** A compensating control is an alternative control that if the primary control fails, there are other controls in place to mitigate any risk.

## ACCOUNTING SYSTEMS

1. Is a chart of accounts or accounting structure maintained?  
 Yes  No
2. Are funds adequately segregated for grant fund reporting?  
 Yes  No

3. Is an accrual accounting system used?  
Yes No  
If not, do you report on an accrual basis?  
Yes No

**Definition of accrual:** method under which revenues are recognized in the period they become available and measurable, and expenditures are recognized in the period the liability is incurred. Most government accounting follows this method.

## PETTY CASH SYSTEM

1. Does your organization have petty cash?  
Yes No N/A  
If yes, please answer the following:
- a. Are the replenishments appropriately allocated to DEED's funds?  
Yes No
  - b. How much money is kept in petty cash?  
Enter how much money your organizations keeps in petty cash.
  - c. How is petty cash safeguarded?  
Enter how your organization safeguards petty cash.
  - d. How often is petty cash reconciled or replenished?  
Enter how frequently your organization reconciles or replenishes petty cash.

## CASH RECEIPT AND DISBURSEMENT SYSTEM

1. Is there adequate segregation of duties between cash receipts and disbursements?  
Yes No
2. Is there adequate documentation to support all expenses reported on the general ledger?  
Yes No
3. Are there policies and procedures in place to identify and recapture improper payments?  
Yes No  
If no, what process is in place to identify and recapture improper payments?  
If no, enter what process is in place to identify and recapture improper payments.
4. Are vendor invoices compared and reconciled to purchase orders?  
Yes No  
If no, why not?  
If not, enter in why your organization doesn't compare and reconcile invoices to purchase orders.



5. Are invoices authorized for payment?  
Yes No  
If no, why not?  
If not, enter in why your organization doesn't authorize invoices for payment.
6. Are vendor account balances reviewed?  
Yes No  
If no, why not?  
If not, enter in why your organization doesn't review vendor account balances.
7. Are your bank account(s) covered by FDIC or FSLIC?  
Yes No  
If yes, for what amount?  
If yes, enter in the dollar amount of your organization's FDIC or FSLIC coverage.
8. Does the amount kept in any account exceed the FDIC or FSLIC coverage?  
Yes No  
If yes, how are the funds in excess insured from loss?  
If yes, enter how the funds in excess are insured from loss.
9. Are receipts deposited immediately?  
Yes No

## REPORTING

1. Which monthly fiscal request is submitted to DEED?  
Financial Status Report (FSR)/Cash Advance Payment Request (CAPR)  
Reimbursement Payment Request (RPR)
2. Are there policies and procedures in place to ensure accurate financial reporting?  
Yes No
3. Are there policies and procedures in place to ensure that the reporting system is safeguarded, and security is limited to the appropriate staff?  
Yes No

## PROGRAM INCOME

### (REFERENCE 2 CFR200.80 OF THE OMB UNIFORM GUIDANCE)

Program Income – The grant recipient's written program income policy and procedures describe the allowability of costs in accordance with [Subpart E – Cost Principles](#) and have been issued to key personnel and, if applicable, subgrantees. (U.S. DOL Employment and Training Administration, Core Monitoring Guide).

1. Do you have program income?  
Yes No  
If yes, please answer the following questions:

- a. Do you have policies and procedures for program income requirements?  
Yes    No
- b. Do you have a system in place to record and expend program income?  
Yes    No
- c. Do you expend program income before expending grant funds?  
Yes    No

## **COST CLASSIFICATION/PRINCIPALS**

Cost Principals - There is written evidence that costs being allocated to the grant are allowable, being treated consistently over time and within the accounting system, are necessary, reasonable, and allocated to the grant based on benefit received.

- 1. Have written and uniform cost classifications for each cost category been developed?  
Yes    No
  - a. If yes, do you verify that these classifications are properly adhered to by subgrantee(s), if applicable?  
Yes    No    N/A
  - b. If no, then please explain why the cost classifications haven't been developed.  
*Enter why cost classifications haven't been developed.*
- 2. Do you have written policies and procedures for distributing costs, staff time and administrative costs among funding streams, programs, etc.?  
Yes    No
- 3. How do you allocate shared costs?  
Cost Allocation Plan        Approved Indirect Rate
- 4. How do you allocate staff's time among the various grant programs they work on?  
*Enter how your organization allocates staff's time among the various grant programs they work on.*
- 5. Is there written evidence, such as timesheets, used to allocate personnel time and costs?  
Yes    No  
If no, how is time allocated?  
*If no, please enter how your organization allocates time.*
- 6. How do you ensure that the grant is not charged unallowable costs based on the cost principles and the provisions of the grant agreement?  
*Enter how your organization ensures that the grant is not charged unallowable costs based on the cost principles and provisions of the grant agreement.*
- 7. Are you aware that DEED's grant funds cannot pay the cost of other programs?  
Yes    No

## ON-THE-JOB TRAINING (OJT)

1. Do you utilize OJT's?
  - Yes  No
 If yes:
  - a. Do you have an OJT monitoring process?
    - Yes  No
  - b. Does monitoring include identifying the participant's progress and/or skill attainment during the training period?
    - Yes  No
  - c. Are you aware of the new WIOA regulations when determining the amount of OJT reimbursement to the employer? ([WIOA 680.730](#))
    - Yes  No  N/A
  - d. Do you have a contract with the required assurances?
    - Yes  No

## AUDIT

1. Does DEED have a copy of your most recent audit report?
  - Yes  No
2. Has the audit report identified your agency as high risk?
  - Yes  No
3. Do you review your subgrantee's audit reports?
  - Yes  No  We don't have subgrantees

## EQUIPMENT PURCHASES/INVENTORY

Equipment is defined by the federal government in [Uniform Guidance 2 CFR 200](#) (200.313) as *".....tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or \$5,000."* Purchasing equipment with DEED funds cannot occur within the second year of the grant period (if applicable). The grantee must submit a property/equipment inventory list of items purchased with DEED funds annually.

1. Do you have minimum insurance coverage for real property and equipment acquired with DEED grant funds?
  - Yes  No  N/A
2. In the past year, has property and/or equipment (over \$5,000 per item) been purchased with DEED grant funds?
  - Yes  No
 If yes, please answer the following questions:

- a. List items, date of purchase, and costs:  
Enter items, date of purchase, and cost
  - b. Was prior approval received from DEED?  
Yes No
  - c. Are you aware that purchasing equipment in the second year of the grant is prohibited?  
Yes No
3. Do you conduct an inventory of equipment and is it reconciled at least once every two years?  
Yes No N/A
4. Do you have a process/policy in place to identify electronic devices and/or equipment that has been lost, damaged, stolen, or disposed of?  
Yes No
5. Do you have assets such as bus cards, credit cards, gift cards, etc.  
Yes No
- If yes, please answer the following questions:
- a. Is inventory conducted on these assets?  
Yes No  
If yes, how often is this conducted and by whom?  
If yes, enter how often inventory is conducted and by whom.
  - b. How are these items safeguarded to prevent unauthorized use?  
If yes, enter in how your organization has safeguarded these items to prevent unauthorized use.
  - c. How are these items tracked to ensure proper usage?  
If yes, enter in how your organization tracks these items to ensure proper usage.
6. Can you attest or confirm that you have made efforts where required or applicable to follow the “Buy American” Act for purchases of products or goods?  
Yes No

## LIABILITY INSURANCE

Attach a copy of your liability insurance certificate and answer the following questions.

1. Does your liability insurance include employee dishonesty?  
Yes No
2. Does the coverage include participant work-related and/or training activities?  
Yes No N/A
3. Has this coverage requirement been included in your subgrantee agreements?  
Yes No We don't have subgrantees

Note: This is in addition to paid employment activities (work experience, On-the-Job Training (OJT)) covered by workers compensation.

## PROCUREMENT SYSTEMS

1. Do you conduct procurement activities in a manner that promotes full and open competition?  
Yes No
2. Have you correctly identified each third-party as a subgrantee or a contractor?  
Yes No N/A
3. Do you understand the two roles (subgrantee or contractor) in accordance with the Uniform Guidance?  
Yes No
4. Do you conduct a risk assessment of your subgrantees?  
Yes No We don't have subgrantees

## REQUEST FOR PROPOSALS (RFP)

1. Do you contract for administrative services, goods, and/or grant program services (Not including audit services)?  
Yes No  
If yes: please answer the following questions.
  - a. For which programs?  
Enter your organization's contracted programs.
  - b. Do you require the same contract provisions of a subgrantee that is similar to DEED's master contract (PSP) or stand-alone contract?  
Yes No We don't have subgrantees
  - c. Do you have a policy or procedure in place to conduct fiscal and program monitoring of subgrantees?  
Yes No We don't have subgrantees
  - d. Do you conduct financial reconciliations on all subgrantee agreements over \$50,000?  
Yes No We don't have subgrantees
  - e. How often is a solicitation or RFP conducted?  
Enter how often your organization conducts a solicitation or RFP.
  - f. When was the last time an RFP was conducted for program services?  
Enter how often your organization conducts a solicitation or RFP.
  - g. Is the review criteria similar to the elements in [Office of Grants Management Policy 08-02?](#)  
Yes No

- h. Do you maintain a written code of conduct covering conflicts of interest and governing the actions of your employees or Board members engaged in the selection, award, and administration of contract?  
Yes No
- 2. Do you contract for audit services?  
Yes No  
If yes, please answer the following questions:
  - a. How often is an RFP conducted for audit services?  
Enter how often your organization conducts an RFP for audit services.
  - b. When was the last time an RFP was conducted for audit services?  
Enter the last time your organization conducted an RFP for audit services.
- 3. Do you have noncompetitive (sole source) procedures?  
Yes No
- 4. How do you administer contracts and confirm the terms and conditions of the contracts are being met?  
Enter how your organization administers contracts and confirms the terms and conditions of the contracts are being met.
- 5. Do you have a process for the closeout of contracts?  
Yes No
- 6. Does the contract closeout policies and procedures address the following issues:
  - a. Final Payment?  
Yes No
  - b. Final deliverable of goods and/or services?  
Yes No

**PERSONNEL**

- 1. Is there a current written personnel policy?  
Yes No  
If yes, does the policy include the hiring procedures to fill staff vacancies supported by grant funds?  
Yes No
- 2. Are there current vacancies showing on the organizational chart?  
Yes No  
If yes, do/does the vacancy(ies) affect the implementation of any DEED-funded grants?  
Yes No

3. Are appropriate grant staff properly insured and bonded?  
Yes No  
If yes, who is bonded?  
Enter the names of the grant staff who are insured and bonded.  
  
If no, do you conduct background or qualification checks?  
Yes No
4. Has the grantee confirmed and disclosed in a timely manner, in writing, to DEED all violations of criminal law involving fraud, bribery, or gratuity violations potentially affecting the grant award?  
Yes No N/A
5. Are salary and bonuses reasonable and comparable to the local labor market and within the Executive Level II salary cap? (TEGL 5-06).  
Yes No
6. Are bonuses, raises, and leave practices, covered in the written personnel policies?  
Yes No
7. Is there sufficient documentation to support the salaries and fringe benefits charged to DEED grants?  
Yes No
8. Is payroll certified by management?  
Yes No
9. Are leave requests used and signed by employees/participants/supervisors?  
Yes No
10. Are employees/participants paid only by check or direct deposit?  
Yes No
11. Do you retain payroll withholding forms for employees and participants?  
Yes No
12. Do employees directly time charge to grants based on activities conducted for each grant?  
Yes No
13. Is there a procedure for cross-training or rotation of duties for accounting personnel?  
Yes No

**Grantee Obligations Acknowledgement Checklist**

Please read and check all items to confirm that you understand all requirements. Sign and return this form with your work plan/contracting packet. If you have questions, please contact your program coordinator.

**I understand:**

**Eligibility/Enrollment Elements**

- and have read the "[Documentation Needed to Support Participant Eligibility](#)" for participant eligibility requirements including obtaining and retaining backup documentation to support a participant's eligibility.
- and have read the "[Program Operations Guide](#)" and understand that there are program requirements we must follow.
- and have read the "[ACP Cost Category Guidance](#)" and understand that there are fiscal requirements we must adhere to.

**Workforce One (WF1)**

- that my organization is required to enroll all eligible participants into the Workforce One (WF1) database.
- that all enrollment/eligibility documentation must be collected *before* enrolling a participant into WF1.
- that the participant's enrollment date must be on or after the date all supporting documentation is received.
- that all data (enrollments, case notes, activities, support services, credentials, employment data, exits, etc.) must be entered into WF1 within fifteen (15) business days of event date.
- that one-on-one contact/engagement is required for all enrolled participants at minimum, once every thirty (30) days and the contact must be documented in WF1.

**Payment Requests (RPR/FSR) - due monthly, by the 20<sup>th</sup> of the following month**

- that we are responsible for tracking ACTUAL incurred grant costs and submit \$0 RPR/FSR if no expenses are incurred.
- that we are responsible for retaining documentation of these costs and will submit to DEED staff upon request.
- that RPR payments are made on a reimbursement basis and will not be made unless all required reports have been submitted.
- that we cannot bill DEED for a participant until he/she/they are entered into WF1; back billing is not permitted.
- all expenses billed must be within the scope and detail of the approved work plan.
- all expenses associated with participants lacking enrollment/eligibility backup documentation will be disallowed.

**Quarterly Reports -due April 30, July 30, October 30, and January 30.**

- that my organization is required to submit a quarterly narrative that describes the progress of the award. (Due the 30th of the month following the end of the quarter.)

**Modifications to the Grant**

- that my organization must promptly notify DEED of any proposed change to the scope of the project, project activities, budget, work plan, grant expenditures, partners, or completion date and that any changes must be approved by DEED.
- that proposed changes are subject to approval by DEED and are not effective until all parties have signed a modification/amendment agreement.
- the project end date, is as stated in the Grant Agreement, and that any requests to extend or modify the contract are subject to approval by DEED and must be submitted, in writing, at least 60 days prior to the end of the contract.

**Other**

- that the appropriate staff will attend all onboarding, WF1 training, and 30, 60, 90-day check in sessions with DEED ACP staff.
- that my organization is required to monitor all subgrantees receiving \$50,000 or more of these grants' funds.
- that my organization, unless otherwise stated in legislation/grant paperwork, is limited to Administrative Costs that cannot exceed 10% of the grant award or 10% of the expended award, whichever is less.
- and have read the [MN Office of Grants Management 08.01](#) conflict of interest policy and disclosed any actual, potential or perceived conflict(s).

**Wage Data**

- I am required to report placement and wage data for all individuals who receive training through the grant project.

---

Print the Name of your Organization and Grant program (*WESA, P2P, SEA, SS, Direct Appropriation, MFRP, etc.*)

---

Print Your Name and Title

---

Signature

---

Date



Pathways to Prosperity SFY 2024 and SFY 2025	Total (2-year) Budget	SFY 2024 (December 1, 2023 - June 30, 2024)	SFY2025 (July 1, 2024 - June 30, 2025)
<b>Fond du Lac College - Total Budget &gt;</b>	<b>\$16,736.00</b>	<b>\$0.00</b>	<b>\$16,736.00</b>
833 - Administration Costs	\$0.00	\$0.00	\$0.00
885 - Direct Services	\$0.00		
838 - Direct Customer Training	\$16,736.00	\$0.00	\$16,736.00
828 - Support Services Costs	\$0.00		

838 - Direct Customer Training - Totals for All Agencies > Participant tuition and required books, tools, uniforms, and fees. Staff salary/fringe in the classroom. Participant wages/fringe for work experience, OJT			
<b>Fond du Lac College - Total Direct Customer Training</b>	\$16,736.00	\$0.00	\$16,736.00
Intro to Human Services	\$16,736.00		\$16,736.00
	\$0.00		
	\$0.00		
	\$0.00		
	\$0.00		

**REIMBURSEMENT PAYMENT REQUEST and PERFORMANCE OUTCOMES**

Exhibit J - Example

**City of Duluth  
Workforce Development**

Submit completed form via email to [cturner@duluthmn.gov](mailto:cturner@duluthmn.gov) on or before the 10th of the month

SECTION 1:			
VENDOR NAME: <b>EXAMPLE</b>		GRANT NAME: <b>Pathways to Prosperity - SFY24</b>	
REMIT TO ADDRESS:		Sub-recipient Contract #	City of Duluth Contract #
		GRANT PERIOD FROM:	GRANT PERIOD TO: <b>6/30/2025</b>
Phone #		REIMBURSEMENT PERIOD FROM:	REIMBURSEMENT PERIOD TO:
FORM PREPARED BY:	PHONE:	INVOICE NUMBER:	FINAL: <b>YES [ ] NO [ ]</b>
EMAIL:		City of Duluth PROGRAM CONTACT NAME: <b>Carol Turner 730-5244</b>	City of Duluth PROGRAM CONTACT EMAIL: <a href="mailto:cturner@duluthmn.gov">cturner@duluthmn.gov</a>

SECTION 2: City of Duluth PROGRAM USE ONLY			
	AMOUNT	FUND	<b>Please complete the yellow cells only, and do not change the formatting within the cells.</b>
<b>TOTAL</b>	<b>\$0.00</b>	<b>268-031-6227-P2P4</b>	

SECTION 3: Monthly Reporting							
ACTIVITY ID	COST CATEGORY DESCRIPTION (PER APPROVED BUDGET)	A. APPROVED BUDGET	B. PREVIOUS REIMB. REQUEST	C. REIMB. REQUESTED THIS PERIOD	D. (B + C = D) TOTAL REIMB.	E. (A - D = E) AVAILABLE BALANCE	F. UNSPENT OBLIGATIONS
					\$0.00	\$0.00	
					\$0.00	\$0.00	
					\$0.00	\$0.00	
					\$0.00	\$0.00	
					\$0.00	\$0.00	
					\$0.00	\$0.00	
					\$0.00	\$0.00	
<b>TOTAL</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	

SECTION 4: Performance Outcomes Reporting						
Performance Metrix - Reported at the end of each calendar quarter	# Previously Reported	# This month	Total	Goal	% of Goal	
			0		#DIV/0!	
			0		#DIV/0!	
			0		#DIV/0!	
			0		#DIV/0!	

SECTION 5: COMMENTS
<b>THIS IS THE SPACE TO PLACE ANY REMARKS OR ADDITIONAL COMMENTS AS NECESSARY.</b>

**SECTION 6: ATTESTATION**

By submitting this form, I certify that the request is in accordance with the City of Duluth cash management requirements and appropriate contract terms; the data reported is correct and the amount of the request is not in excess of immediate disbursement needs. By signing this report, I certify to the best of my knowledge and belief that the report is true, complete and accurate and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the federal award. I am aware that any false, fictitious, or fraudulent information or the omission of any material fact, may subject me to criminal civil or administrative penalties for fraud, false statements, false claims, or otherwise. If submitting this form via email, without signature affixed below, place the statement above in the body of your email. By doing so, the sender of the email designates they are hereby authorized to provide approval of this request. Without a signature and/or statement included in the body of the email the form will be rejected.

Grantee Authorized <b>Signature</b>	Date
Grantee Typed Name and Title	

City of Duluth Staff Authorized Signature	Date
<b>Carol Turner, Operations Manager</b>	
City of Duluth Staff Name and Title	

**REIMBURSEMENT PAYMENT REQUEST and PERFORMANCE OUTCOMES**

Exhibit J - Example

**City of Duluth  
Workforce Development**

Submit completed form via email to [cturner@duluthmn.gov](mailto:cturner@duluthmn.gov) on or before the 10th of the month

<b>SECTION 1:</b>			
VENDOR NAME:		GRANT NAME: <b>Pathways to Prosperity - SFY25</b>	
REMIT TO ADDRESS:		Sub-recipient Contract #	City of Duluth Contract # <b>X047800</b>
		GRANT PERIOD FROM: <b>7/1/2024</b>	GRANT PERIOD TO: <b>6/30/2025</b>
Phone #		REIMBURSEMENT PERIOD FROM:	REIMBURSEMENT PERIOD TO:
FORM PREPARED BY:	PHONE:	INVOICE NUMBER:	FINAL: <b>YES [ ] NO [ ]</b>
EMAIL:		City of Duluth PROGRAM CONTACT NAME: <b>Carol Turner 730-5244</b>	City of Duluth PROGRAM CONTACT EMAIL: <a href="mailto:cturner@duluthmn.gov">cturner@duluthmn.gov</a>

**SECTION 2: City of Duluth PROGRAM USE ONLY**

	AMOUNT	FUND	<b>Please complete the yellow cells only, and do not change the formatting within the cells.</b>
<b>TOTAL</b>	<b>\$0.00</b>	<b>268-031-6227-P2P5</b>	

**SECTION 3: Monthly Reporting**

ACTIVITY ID	COST CATEGORY DESCRIPTION (PER APPROVED BUDGET)	A. APPROVED BUDGET	B. PREVIOUS REIMB. REQUEST	C. REIMB. REQUESTED THIS PERIOD	D. (B + C = D) TOTAL REIMB.	E. (A - D = E) AVAILABLE BALANCE	F. UNSPENT OBLIGATIONS
					\$0.00	\$0.00	
					\$0.00	\$0.00	
					\$0.00	\$0.00	
					\$0.00	\$0.00	
					\$0.00	\$0.00	
					\$0.00	\$0.00	
<b>TOTAL</b>		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	

**SECTION 4: Performance Outcomes Reporting**

Performance Matrix - Reported at the end of each calendar quarter	# Previously Reported	# This month	Total	Goal SFY22 + SFY23 Cumulative Total	% of Goal
			0		#DIV/0!
			0		#DIV/0!
			0		#DIV/0!
			0		#DIV/0!

**SECTION 5: COMMENTS**

THIS IS THE SPACE TO PLACE ANY REMARKS OR ADDITIONAL COMMENTS AS NECESSARY.

**SECTION 6: ATTESTATION**

By submitting this form, I certify that the request is in accordance with the City of Duluth cash management requirements and appropriate contract terms; the data reported is correct and the amount of the request is not in excess of immediate disbursement needs. By signing this report, I certify to the best of my knowledge and belief that the report is true, complete and accurate and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the federal award. I am aware that any false, fictitious, or fraudulent information or the omission of any material fact, may subject me to criminal civil or administrative penalties for fraud, false statements, false claims, or otherwise. If submitting this form via email, without signature affixed below, place the statement above in the body of your email. By doing so, the sender of the email designates they are hereby authorized to provide approval of this request. Without a signature and/or statement included in the body of the email the form will be rejected.

Grantee Authorized <b>Signature</b>	Date
Grantee Typed Name and Title	

City of Duluth Staff Authorized Signature	Date
<b>Carol Turner, Operations Manager</b>	
City of Duluth Staff Name and Title	