

# ALABAMA WORKFORCE INVESTMENT SYSTEM

Alabama Department of Economic and Community Affairs  
Workforce Development Division  
401 Adams Avenue  
Post Office 5690  
Montgomery, Alabama 36103-5690

May 5, 2009

## GOVERNOR'S WORKFORCE DEVELOPMENT DIRECTIVE NO. PY2007-07, Change 2

**SUBJECT:** PY 2008/FY2009 Grant Agreement Package

- Purpose.** To provide Local Workforce Investment Boards with guidance on the development and submission of their respective American Recovery and Reinvestment Act of 2009 (ARRA) grant agreement packages.
- Discussion.** The instructions for local area preparation of PY2008 WIA Adult, Dislocated Worker, and Youth annual grant agreement package submission, provided under GWDD No. PY2007-07, are appropriately updated to accommodate the ARRA grant agreement submission requirements. Please note: this directive was incorrectly released under title PY2007-06, Change 7 dated March 19, 2009. The above directive number should be used for all Planning documentation from this point forward.

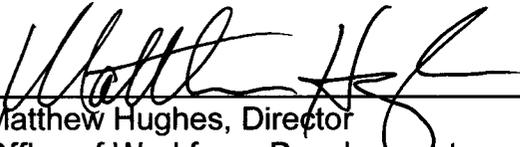
A Grant agreement Package, including Grant Agreement Sheet (WIA-59-S), assurances/certifications, and a modified WIA Grantee Budget Summary (WIA-60-S) form are prescribed. At a minimum, narrative changes must include a description of any new activities to be added such as a summer Youth Programs and Incumbent Worker Training.

- Action.** Each local workforce investment board shall use the attached guidance when preparing/submitting its respective PY08/FY09 Grant Agreement modification to include the ARRA.

Allocations for the ARRA WIA Adult, Youth, and Dislocated Worker programs can be found in Workforce Development Directive PY2007-06, Change 6.

Local Area Grant agreement modification packages should be received at the Office of Workforce Development by March 31, 2009.

- Contact.** Any questions regarding this Directive should be addressed to Ray Clenney, Workforce Development Division, State Planning at (334) 242-1421.

 5/5/09  
Matthew Hughes, Director  
Office of Workforce Development

**WIA GRANT AGREEMENT**  
**Alabama Department of Economic and Community Affairs (ADECA)**

**WIA-American Recovery and Reinvestment Act of 2009**

<b>A. Plan No.:</b> _____	<b>Modification:</b> _____	<b>Revision:</b> _____	<b>Effective Date:</b> _____
<b>B. Grant Recipient</b>		<b>C. Administration Entity</b>	
1. Name _____		1. Name _____	
2. Organization _____		2. Organization _____	
3. Address _____		3. Address _____	
4. City _____		4. City _____	
5. Zip _____		5. Zip _____	
6. Contact _____		6. Contact _____	
7. Telephone _____		7. Telephone _____	
8. E-Mail _____		8. E-Mail _____	
<b>D. Program/Fiscal Year Proposed Funding:</b> WIA-ARRA Funds _____		<b>E. Grant Period</b> Start: _____ End: _____	

**II. ASSURANCES AND CERTIFICATIONS:** Assurances/Certifications on page 2 are part of this Grant Agreement.

**III. LOCAL AREA SUBMISSION** (Attach any comments on a separate sheet):

Name/Title	Signature	Date
<b>Grant Recipient</b>		
<b>Chair, Local Workforce Investment Board</b>		
<b>Bill Johnson</b> Director, ADECA		
<b>Matthew Hughes</b> Director, Gov. Office of Workforce Development		
<b>Bob Riley</b> Governor		

**WIA GRANT AGREEMENT**  
**Alabama Department of Economic and Community Affairs (ADECA)**

**WIA GRANT AGREEMENT**

**Assurances and Certifications**

- A. Signatories assure this Grant Agreement will be executed in accordance with the Workforce Investment Act of 1998 applicable federal regulations, State law, and Governor's Directives, pursuant to WIA , as published and amended.
- B. Liability for funds under this grant rests with the local workforce investment area grant recipient/signatory.
- C. Modifications to this initial grant become effective only after approval by the Governor's Designee. Plan modifications must adhere to advance publication requirements and be submitted according to directive procedures. Funding is contingent on actual appropriations by Congress.
- D. This grant is comprised of planned performance/ payment systems narrative and a grantee budget summary.
- E. The ADECA Workforce Development Division, acting for the Governor, will monitor for performance and require such reports as may be necessary to carry out this responsibility.
- F. Parties to this agreement certify to the best of their knowledge and belief that information contained in the attached plan/modification is a reasonably accurate depiction of WIA-funded planned activities. Signatories to the Agreement further attest that the LWIA and the LWIB will comply with the WIA assurances attached to the LWIA 5 Year Plan.
- G. As a condition of the award of financial assistance from the Department of Labor under Title I of WIA , the grant applicant assures that it will comply fully with the nondiscrimination and equal opportunity provisions of the following laws: Section 188 of the Workforce Investment Act of 1988 (WIA), which prohibits discrimination against all individuals in the United States on the basis of race, color, religion, sex, national origin, age, disability, political affiliation or belief, and against beneficiaries on the basis of either citizenship/status as a lawfully admitted immigrant authorized to work in the United States or participation in any WIA Title I - financially assisted program or activity; Title VI of the Civil Rights Act of 1964, as amended, which prohibits discrimination on the bases of race, color, and national origin; Section 504 of the Rehabilitation Act of 1973, as amended, which prohibits discrimination against qualified individuals with disabilities; the Age Discrimination Act of 1975, as amended, which prohibits discrimination on the basis of age; and Title IX of the Education Amendments of 1972, as amended, which prohibits discrimination on the basis of sex in educational programs. The grant applicant also assures that it will comply with 29 CFR part 37 and all other regulations implementing the laws listed above. This assurance applies to the grant applicant's operation of the WIA Title I - financially assisted program or activity, and to all agreements the grant applicant makes to carry out the WIA Title I - financially assisted program or activity. The grant applicant understands that the United States has the right to seek judicial enforcement of this assurance.
- H. Comply with the Americans with Disabilities Act of 1990, Title II, Subtitle A.
- I. Comply with the OSHA work place requirements.
- J. Comply with the WDD Procurement policy (includes all subrecipient/contractor levels).
- K. Comply with the ADECA Audit Policy, and with OMB Circular A-133.
- L. Certify that systems and procedures are in effect which parallel those described within the local area plan.
- M. Comply with other applicable statutes as related to workforce development programs.
- N. It is agreed that the terms and commitments contained herein shall not be constituted as a debt of the State of Alabama in violation of Article 11, Section 213 of the Constitution of Alabama, 1901, as amended by Amendment No. 26. It is further agreed that if any provision of this grant shall contravene any statute or Constitutional provision or amendment, either now in effect or which may, during the course of this grant, be enacted, then that conflicting provision in the grant shall be deemed null and void. The grant's sole remedy for the settlement of any and all disputes arising under the terms of this agreement shall be limited to the filing of a claim with the Board of Adjustments for the State of Alabama.

**WIA Grant Agreement  
Instructions  
WIA-59-S**

**I. GRANT RECIPIENT/DESIGNEE**

- A. Plan No.:** Enter the two digit local area plan number, per the following:  
1st digit - year of WIA funds, e.g., 7 for 2007, 8 for 2008, etc.  
2nd digit - local area, e.g., 2 for AWIA, 3 for Jefferson, or 4 for Mobile.\*
- Modification:** Indicate modification sequence: "0" for initial plan, "A" for first modification, "B" for second modification, etc.
- Revision:** Revisions should only be used to indicate minor modifications. Revision sequence: "1" for first minor modification, "2" for second minor modification revision, etc.
- For example, 93-0 would be the Jefferson initial PY2009 Plan, 93-A would be the first modification to the Jefferson PY2009 Plan, 93-A Rev. 1 would be the first minor modification revision to the first modification of the Jefferson PY2009 Plan.
- Effective Date:** This is the date the Plan, modification, or revision takes effect according to the effective date indicated within the corresponding directive. If an effective date is not provided in the directive the directive's release date should be used.
- B. Grant Recipient:** Enter the name, organization, address, contact person, telephone, and E-mail address of the grant recipient.
- C. Administrative Entity:** If different from the Grant Recipient, enter the name, organization, address, contact person, telephone number, and E-mail address of the administrative entity; otherwise, leave blank.
- D. Program/Fiscal Year Proposed Funding:** Indicate the PY/FY time periods and fund origins, e.g., PY08/FY09 WIA Funds. Enter the total amount of actual or estimated LWIA funding for the time period covered by this action. This entry should be identical to that recorded on line 3.d. (Total LWIA Funds) of the accompanying WIA-60 form.
- E. Grant Period:** Enter the start date and end date of the grant period.

**II. ASSURANCES AND CERTIFICATIONS**

Review the assurances and certifications on page 2 of the WIA-59; these are binding requirements on the LWIA.

**III. LOCAL AREA SUBMISSION**

Enter the typed name and title of each authorized signatory, as appropriate. Enter the signature of each authorized signatory beside the typed name and title.

\* Note: This digit has been modified to coincide with standard Local Area numbering references.

State of Alabama  
Alabama Office of Workforce Development  
Workforce Development Division

American Recovery and Reinvestment Act of 2009  
Grantee Budget Summary

<b>1. Grant Recipient:</b>					
Address:					
Contact Person:			E-mail:		
Title:			Phone No.:		Fax No.:
<b>2. Plan No.:</b>			<b>Yr. of Funds:</b>		<b>Effective Date:</b>
Directive No.:			Grant Period - Adult/D.W.:		
USDOL Grant No.:			Grant Period - Youth:		
<b>3. Program:</b>	<b>Governor's Set Aside</b>	<b>Adult Funds</b>	<b>Youth Funds</b>	<b>Dislocated Worker Funds</b>	<b>d. Total LWIA Funds</b>
a. CFDA Number		17.258	17.259	17.260	
b. Allocation Year					
c. Fund Allocation/Grant Amount					
<b>4. Cost Categories/Budget:</b>					
a. Administration Funds					
b. Program Funds					
c. Program Fund Transfers					
d. Adjusted Program Funds					
e. Total Funds					
<b>Remarks:</b>					

**INSTRUCTIONS FOR COMPLETING THE ALABAMA WIA  
GRANTEE BUDGET SUMMARY FOR ADULT, YOUTH, AND DISLOCATED WORKER  
LOCAL AREA PLANS  
(WIA 60-S)**

LWIA Adult, Youth, and Dislocated Worker program budgeting information will be consolidated on a single WIA-60 form. Each executed WIA-60 will remain a valid budget document for the full grant period.

1. **Grant Recipient:** This should be the same as reported on the Grant Agreement Sheet; the contact person should be able to answer any questions regarding information contained in this form.
2. **Plan No:** Enter the two digit local area plan number, per the following:
  - 1st digit - year of WIA funds, e.g., 7 for 2007, 8 for 2008, etc.
  - 2nd digit - local area, e.g., 2 for AWIA, 3 for Jefferson, or 4 for Mobile.\*
  - Indicate modification sequence per the following: "0" for initial plan, "A" for first modification, "B" for second modification, etc.
  - Revisions should only be used to indicate minor modifications. Revision sequence should be as follows: "1" for first minor modification, "2" for second minor modification revision, etc.

For example, 93-0 would be the Jefferson initial PY2009 Plan, 93-A would be the first modification to the Jefferson PY2009 Plan, 93-A Rev. 1 would be the first minor modification revision to the first modification of the Jefferson PY2009 Plan.

**Directive No.:** Reference Governor's Workforce Development Directive(s) used for Plan changes.

**USDOL Grant No:** The USDOL Grant Number can be found on the Notice of Obligation (NOO) issued by USDOL to ADECA/WDD. Copies of all NOOs will be provided to local areas as Attachments to the Allocation GWDD.

**Yr. of Funds:** Enter the PY/FY number corresponding to the year grant funds were first made available. The number should be consistent with the USDOL Notice of Obligation (NOO).

**Effective Date:** This is the date the Plan, modification, or revision takes effect according to the effective date indicated within the corresponding directive. If an effective date is not provided in the directive the directive's release date should be used.

**Grant Period – Adult/D.W.:** Enter the start date and end date of the Adult/D.W. funds grant period.

**Grant Period – Youth:** Enter the start date and end date of the Youth funds grant period, as shown on the WIA-59 section E.

**LWIA Identifying Grant Numbering Methodology**

LWIA programs have four separate fund categories; Governor's Set Aside (15% or 25%), Adult, Youth, and Dislocated Worker. LWIA expenditures must be separately tracked against each grant type.

3. **Program :**
  - a. **Catalog of Federal Domestic Assistance (CFDA) Number:** This information is provided by WDD. No LWIA entry is necessary.
  - b. **Allocation Year:** Provide the allocation year for the effected funds.
  - c. **Fund Allocation/Grant Amount:** By column, enter the amount of any Governor's Set Aside (15% or 25%) funds awarded the LWIA, and the amounts of Adult, Youth, and Dislocated Worker funds granted the LWIA. Amounts entered should incorporate any additional (or reductions in) funds due to reallocations. Additional detail regarding the break down of LWIA allocation amounts is found on the WIA-55 Notice of Governor's Action accompanying the completed Grant Agreement package.
  - d. **Total LWIA Funds:** This information is calculated based on the data provided in section 3c.

4. **Cost Category/ Budget:** Enter the total amount of grant funds budgeted for expenditure by cost category.
- a. **Administration Funds:** Enter, by column, the amount of any LWIA Governor Reserve, Adult, Youth, and Dislocated Worker funds reserved for administration. Enter the total of LWIA funds available for program administration expenditures. Include any additions to (or reductions in) Administration funds due to reallocations. Not more than 10 percent of Adult, Youth, and Dislocated Worker grant funds may be budgeted/expended for purposes of administration.
  - b. **Program Funds:** Enter, by column, the amount of any LWIA Governor's Set Aside (15% or 25%), Adult, Youth, and Dislocated Worker, and the total of LWIA funds which may be expended for program costs. Include any additions to (or reductions in) program funds due to reallocations.
  - c. **Program Fund Transfers:** By column, enter any amount of LWIA Adult Program Funds the LWIA seeks to transfer to its Dislocated Worker program and/or the amount of any LWIA Dislocated Worker Program Funds the LWIA seeks to transfer to its Adult program. For PY 2008/FY 2009, up to 100 percent of the formula allocated Adult funds and/or Dislocated Worker funds may be transferred between the two programs.
  - d. **Adjusted Program Funds:** Enter, by column, the amount of available LWIA Adult and Dislocated Worker funds, and the total of LWIA funds, adjusted for any above-indicated Adult-Dislocated Worker Program Funds transfer activity.
  - e. **Total Funds:** By column, enter the LWIA's available Administration and Program Governor 15%, Adult, Youth, and Dislocated Worker, and Total funds. Entries on this line must agree with corresponding entries on line 3.c.

Remarks: Provide necessary detail regarding information recorded on this and any previous PY09/FY10 WIA-60 Grantee Budget Agreement document.