



Labor-Management Workforce Development Grants Program 2008 - 2011

Guidelines & Application



Gary Johnson, Director
NYS Governor's Office of
Employee Relations



David A. Paterson
Governor
New York State



Danny Donohue, President
CSEA, Local 1000
AFSCME, AFL-CIO

A Joint Invitation



Gary Johnson
Director
NYS Governor's Office
of Employee Relations



Danny Donohue
President
CSEA

These guidelines explain to CSEA and management representatives in New York State agencies and facilities how to participate in the Labor-Management Workforce Development (LMWD) Grants Program.

The LMWD Grants Program (formerly Agency Workforce Development Grants) offers an opportunity for New York State and CSEA labor-management representatives that face unique workforce and organizational development challenges to apply for grants up to \$50,000. These grants can be used by statewide or local labor-management committees to achieve goals of increasing organizational effectiveness, improving services or work processes, and enhancing employee job skills.

Criteria for the award of grants include involvement of the labor-management process to determine the project goals and potential for other state agencies to replicate what is developed from the grant. Through your leadership, successful grant initiatives can help build trust and strengthen a willingness to work together on a day-to-day basis while building the skills and knowledge of the CSEA-represented New York State workforce.

The LMWD Grants Program offers exciting opportunities for labor-management collaboration on innovative program development. We urge you to become familiar with the program and, above all, to take part. We look forward to the results of your joint efforts.



7/21/08

Table of Contents

Purpose	3
Criteria for Awarding Grants	3
General Guidelines and Requirements	4
Funding	4
Process for Applying	5
Other Assistance	5
LMWD Grant Application Form (five pages)	

Purpose

The Labor-Management Workforce Development (LMWD) Grants Program offers an opportunity for New York State agencies/facilities and CSEA locals who face unique workforce and organizational development challenges to apply for grants up to \$50,000. These grants can be used to address large scale issues in the workplace caused by such things as reorganization, new technology, changing customer needs, new legal or regulatory requirements, or specialized job skill training needs.

All projects must have the support of CSEA and management, and achieve the mutual goals of increasing organizational effectiveness and enhancing employee job skills. CSEA and management representatives are encouraged to confer with Partnership staff in the development of grant proposals. To apply for a LMWD grant, CSEA local presidents and agency/facility management representatives should prepare a LMWD grant application form (attached) that describes their proposed project.

Criteria for Awarding Grants

Grant applications will be evaluated on the extent to which they address the following criteria.

1. Involvement of labor and management representatives in all phases of the project from development to evaluation.
2. Description of the process undertaken to determine the need for this grant proposal.
3. Likelihood of success in addressing specific areas of employees' education or training needs.
4. Strength of agency/facility commitment to the project (for example, release time, staff support, additional agency/facility resources), and support demonstrated by labor and management.
5. Cost effectiveness of the proposal.
6. Adequacy of the plans for evaluating project outcomes (for example, evaluation planning, performance measurements, reporting of evaluation results).
7. Reasonableness of the project implementation plan.
8. Potential for other state agencies/facilities to replicate or reuse part of what is developed through the project (for example, curriculum, materials, or evaluation methods).

Preference for grant awards will be given to projects that will be institutionalized beyond the proposed initial project and that teach skills to prepare employees for future as well as current workforce needs.

General Guidelines and Requirements

1. Agencies/CSEA locals should assign a project coordinator for the grant. Project coordinators will be responsible for fulfilling all requirements (for example, coordination with the Partnership, financial reporting, project implementation, and evaluation) for the grant.
2. Agencies/facilities may begin to expend funds only after receiving formal written grant approval from the Partnership. Any changes to the grant or budget plan must be requested in writing before making the change. **Written approval from the Partnership must be received before proceeding.** Project coordinators are accountable for all expenditures and are expected to work closely with their agency/facility fiscal officer.
3. This program is not intended to supplement agency/facility budgets for routine or required training.
4. Grant fund expenditures are subject to the purchasing practices of New York State and individual agencies. Reimbursement will require complete documentation of expenses and original receipts.
5. Grants are not to be used to hire staff or purchase equipment, food, or beverages.
6. The Partnership will retain ownership of any curriculum and any other materials developed. In the event that a grant is used to develop a training curriculum, the curriculum must conform to New York State Governor's Office of Employee Relations/ Labor-Management Committee (GOER/LMC) Copyright Policy. This policy assures that copyright laws are followed with proper approvals for use of copyrighted materials. The agency/facility must provide the Partnership with draft curriculum during the development process (initial design concept, draft, and final curriculum).
7. Training courses must follow Partnership guidelines for submission of course rosters, participant evaluation forms, pre- and post-assessments, etc.
8. Within 30 days of project completion and prior to final reimbursement, the project coordinator is required to submit the following documentation:
 - a. a project evaluation report (summarizing the evaluation methods and results)
 - b. electronic and master copies of any program curriculum, materials, and handouts developed for the grant
 - c. final expense summary report
 - d. other documentation as agreed to by the Partnership and the agency/facility.

Funding

The maximum funding for a grant will be \$50,000. The LMWD Grants Program will continue as available funding permits.

The Partnership will work with each agency/facility to determine the best way to administer the funding of a project. All payments and reimbursements will be made through journal voucher transfers and in accordance with the New York State Finance Law and Office of the State Comptroller's rules and regulations.

Process for Applying

Complete the attached application and return it by mail or fax to Dave Street at:

NYS & CSEA Partnership for Education and Training
Corporate Plaza East – Suite 502
240 Washington Avenue Extension
Albany, NY 12203
Fax: (518) 486-1989

Grants will be reviewed on an ongoing basis as funding permits.

Other Assistance

You may request information on GOER/LMC Copyright Policy or Partnership training guidelines prior to submission of a LMWD grant application.

For additional information or to arrange a meeting to discuss your proposal, contact Dave Street at (518) 402-5988, or email LMWDG@nyscseapartnership.org.



Corporate Plaza East – Suite 502
240 Washington Avenue Extension
Albany, New York 12203
Phone: (518) 486-7814
Fax: (518) 486-1989

LABOR-MANAGEMENT WORKFORCE DEVELOPMENT GRANT APPLICATION (Please type or print)

To apply for a grant, labor-management representatives from your agency/facility must complete this application and mail or fax it to Dave Street at the NYS & CSEA Partnership (mailing address and fax number are provided above). Submit one application for each request. Partnership staff will contact the project coordinator regarding the next steps.

Multiple Requests: If submitting multiple applications, number each request by placing a number in this box in priority order, with number one being the highest priority.

Part A: Application Cover Sheet

1. Agency Name: _____

2. Facility (if applicable): _____

3. Grant Project Title: _____

4. Total number of CSEA-represented employees who will benefit from this grant project: _____

Total numbers in each CSEA Bargaining Unit who will benefit from this grant project:

ASU _____ ISU _____ OSU _____ DMNA _____

5. Title(s) of employees targeted to participate: _____

Part A: Application Cover Sheet (continued)

6. Project Coordinator:

Provide the name of the lead person who will be responsible for fulfilling all grant requirements (financial reporting, coordination with the Partnership, project implementation, and evaluation) for this grant. Project coordinators are accountable for all expenditures and are expected to work closely with their agency/facility fiscal office.

Name: _____ Title: _____

Address: _____

Phone: (____) _____ Fax: (____) _____

Email: _____

7. Labor-Management Contact Information:

By signing and submitting this application, the management representative and the CSEA local president noted below certify that all information contained in this application is accurate and complete. The assessment and development of this grant request has been a joint collaboration and the management representative and the CSEA local president will continue to be involved in all aspects of project implementation and evaluation.

Management Representative*

CSEA Local President

Name: _____

Name: _____

Title: _____

CSEA Local Number: _____

Address: _____

Address: _____

Phone: (____) _____

Phone: (____) _____

Email: _____

Email: _____

**Management representative must be a human resources or personnel director, training director, facility director, or equivalent.*

Signature: _____

Signature: _____

Date: _____

Date: _____

The NYS & CSEA Partnership for Education and Training does not discriminate on the basis of race, color, national origin, gender, religion, age, disability, or sexual orientation in employment, admission, or access to its programs or activities. Reasonable accommodation will be provided upon request.

Part B: Project Narrative

Attach a typed narrative addressing the following topics. Be specific and include topic headings.

1. Project Description:

Describe your proposed project in detail. Fully describe the proposed project, its goals, and what the solution entails – the full scope of the project to be accomplished with the grant.

2. Assessing the Need and Defining Desired Outcomes

Describe the process undertaken to determine the need for this grant proposal. Describe the education or training need this grant proposal will address and describe how the project will successfully meet the need.

Describe the specific outcomes expected from the project. Describe how these outcomes are expected to benefit both your employees and the agency/facility.

3. Project Planning and Implementation

Describe how the project was designed and if a curriculum will be developed for the project. Describe the proposed delivery methods for the project (for example, online course, workshop, train-the-trainer) and what training resources or consultants will be needed for the project.

Describe your project implementation plan (for example, timeline with milestones and dates, progress reporting to the Partnership, etc.).

Describe how labor and management will publicize the project. Describe how you will recruit and select participants, if applicable, and the labor-management process you will follow to accomplish selection.

Describe how the project will be evaluated. What specific performance measures will be used to evaluate the outcomes in the workplace? Can all of the expected outcomes be effectively measured? Who will prepare and review the evaluation report? (Grant developers may consult with Dave Street at the Partnership on project evaluation planning if needed.)

Describe the actions and steps your agency will take to reinforce this project in the workplace to ensure the desired outcomes. If curriculum and training programs are developed with grant funds, how will the training be institutionalized in your agency?

4. Labor and Management Involvement

Describe how labor and management were involved in the development of this project and how both will be involved throughout the project.

Describe the agency/facility commitment to the project and the resources the agency/facility will provide (for example, in-kind contributions, monetary or non-monetary contributions, training or meeting space, release time for participants, staff or agency resources to support the grant, etc.).

5. Replication Potential and Additional Information

Please describe any potential you see for other state agencies to replicate or reuse all or part of what is developed through this project (for example, design process, materials, evaluation methods).

Describe any additional information that you would like to be considered in reviewing this application.

Part C: Budget Narrative

1. Provide a narrative description for each applicable budget category from Part D: Project Budget – Personnel, Materials and Supplies, Facilities, and Other Expenses. This narrative must describe all items identified in the budget lines. For example, under Personnel, provide the name and resume of consultant, number of days of service, cost per day, specifics about travel expenses, and explain why selected. Identify each category by name in the narrative.
2. Provide a brief cost justification for each applicable budget category from Part D: Project Budget – Personnel, Materials and Supplies, Facilities, and Other Expenses to support the cost effectiveness of the proposal. Documentation should include comparison quotes for each expense supporting reasonableness of cost. If lowest cost was not selected, please provide justification for “best value” selection. If a sole source was selected, please explain rationale for selection.

Part D: Project Budget

Please list all applicable costs within the four budget categories. Attach additional sheets if necessary. Original receipts are required for reimbursement.

1. Personnel:

Consultant Fees:	\$ _____
Consultant Mileage:	\$ _____
Consultant Lodging:	\$ _____
Consultant Meals (Breakfast and Dinner only):	\$ _____
Other (Specify): _____	\$ _____
_____	\$ _____
Total Cost	\$ _____
Agency Contribution (subtract)	\$ _____
Other Support – Specify _____ (subtract)	\$ _____
LMWD Grant Funding Requested for Personnel	\$ _____

2. Materials and Supplies: Includes items such as workshop materials or printing. Specify quantities where appropriate.

Workshop Materials:	\$ _____
Printing:	\$ _____
Other (Specify): _____	\$ _____
_____	\$ _____
_____	\$ _____
Total Cost	\$ _____

Agency Contribution (subtract) \$ _____
Other Support – Specify _____ (subtract) \$ _____
LMWD Grant Funding Requested for Materials and Supplies \$ _____

3. Facilities: Includes items such as room rentals and AV equipment. State agency/facility space should be used if available.

Room Rental: \$ _____
 Equipment Rental: \$ _____
 Other (Specify): _____ \$ _____
 _____ \$ _____

Total Cost \$ _____
Agency Contribution (subtract) \$ _____
Other Support – Specify _____ (subtract) \$ _____
LMWD Grant Funding Requested for Facilities \$ _____

4. Other Expenses: Specify items that do not fit into the above categories.

Item 1: _____ \$ _____
 Item 2: _____ \$ _____
 Item 3: _____ \$ _____
 Item 4: _____ \$ _____
Total Cost \$ _____

Agency Contribution (subtract) \$ _____
Other Support – Specify _____ (subtract) \$ _____
LMWD Grant Funding Requested for Other Expenses \$ _____

Total Grant Funding Requested \$ _____
(Add amounts requested in all categories.)

Approval of Agency Fiscal Officer:

Name of Fiscal Officer (please print): _____ Date: _____

Signature of Fiscal Officer: _____ Title: _____

Address: _____

Email: _____ Phone: _____ Fax: _____