E. PLANNING FORM* 3 - Trade-WIA Dual Enrollment

OMB Approval No.

All quarterly entries are CUMULATIVE over all previous quarters

Expiration Date: 01/31/07

PERFORMANCE FACTOR	PROGRAM YEAR QUARTER													
	Admi	Progra	Qt	Qt		Qt	Qt	Qt	Qt	Qt	Qt	Qt	Qt	Qt
	n	m	r1	1 -	r 3	r 4		r 6		-		r	r	r
												10	11	12
Implementation Schedule														
TOTAL PLANNED PARTICIPANTS														
RECEIVING INTENSIVE SERVICES														
ENROLLED IN TRAINING (NEG-FUNDED														
ONLY)														
RECEIVING SUPPORTIVE SERVICES (NEG-														
FUNDED ONLY)														
EXITS														
ENTERING EMPLOYMENT AT EXIT														
Total Expenditures: GRANTEE														
LEVEL														
SUPPORTIVE SERVICES														
PROGRAM MANAGEMENT AND														
OVERSIGHT														
ADMIN EXCLUDING NRP PROCESSING*														
NRP PROCESSING														
• OTHER *														
INDIRECT														
OTHER*														
OTHER.														
Total Expenditures: PROJECT														
OPERATOR LEVEL														
Core and Intensive Services														
TRAINING (NEG-FUNDED ONLY)														
SUPPORTIVE SERVICES (NEG-FUNDED														
ONLY)														
OTHER*														
PROGRAM MANAGEMENT AND														
OVERSIGHT														
ADMIN EXCLUDING NRP PROCESSING*														
NRP PROCESSING														
• OTHER *														
TOTAL EXPENDITURES: GRANTEE														
AND PROJECT OPERATOR LEVEL														
AND PROJECT OPERATOR LEVEL														

^{*}This form must be accompanied by an appropriate budget narrative which lists, for each *ed line item, components of the costs, e.g. staff salaries, fringe benefits, equipment, travel, facilities, and the estimated cost amounts for each.

ETA 9103