



## Planning Form (Dual Enrollment) National Emergency Grant Electronic Application System

All quarterly entries are CUMULATIVE over all previous quarters.

PERFORMANCE FACTOR	PROGRAM YEAR QUARTER								
	ADMIN	PROG M	QTR1	QTR2	QTR3	QTR4	QTR5	QTR6	QTR7
<b>IMPLEMENTATION SCHEDULE</b>									
Receiving Intensive Services									
Enrolled In Training (NEG Funded Only)									
Receiving Supportive Services (NEG Funded Only)									
Exits									
Entering Employment At Exit									
<b>Total Planned Participants</b>									
Supportive Services									
Admin Excluding NRP Processing*									
NRP Processing*									
Other*									
Total: Program Management and Oversight									
Indirect*									
Other*									
<b>Total Expenditures: Grantee Level</b>									
Core and Intensive Services									
Training (NEG Funded Only)									
Supportive Services (NEG Funded Only)									
Other*									
Admin Excluding NRP Processing*									
NRP Processing *									
Other*									
Total: Program Management and Oversight									
<b>Total: Expenditures: Project Operator Level</b>									
<b>Total: Expenditures: Grantee and Project Operator Level</b>									

**Public Burden Statement:**

Persons are not required to respond to this collection of information unless it displays a currently valid OMB Control number. Respondents' obligation to complete this form is required to obtain or retain benefits ( PL: 107-210). Public reporting burden for this collection of information is estimated to average 90 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This is public information and there is no expectation of confidentiality. Send comments regarding this burden estimate to the U.S. Department of Labor, Office of National Response, Room C-5311, Washington, D.C. 20210 (Paperwork Reduction Project 1205-0371).