

**ATTACHMENT II**

OMB Control Number No 1225-0086

Expires May 31, 2019

**ELEMENTS OF AN UNEMPLOYMENT INSURANCE (UI)  
REEMPLOYMENT SERVICES AND ELIGIBILITY ASSESSMENT (RESEA) GRANT PROPOSAL SUMMARY**

(1) State Name:	
(2) Name and Title of the State Agency Administrator:	Name:  Title:  Address:
(3) RESEA Program Lead/Contact  <i>The person who can answer questions about the RESEA proposal.</i>	Name:  Telephone:  E-mail:
(4) UI Program Lead/Contact  <i>The person who can answer questions about the UI aspects of the RESEA proposal. This person may also be the RESEA Program Lead/Contact.</i>	Name:  Telephone:  E-mail:
(5) Total Funds From <u>prior</u> RESEA Grants Projected to Remain after December 31, 2018	\$

<p>(6) Total Proposed RESEA Project Cost</p> <p><i>The total amount of funds requested in this grant, which may be up to the limit specified in Attachment I. Do not include funds carried forward from previous years.</i></p>	\$
<p>(7) Total Administrative Costs</p> <p><i>The total amount of funds requested for administrative costs. This amount cannot exceed more than 15% of total funds requested.</i></p>	\$
<p>(8) Additional IT Costs (Applies to States that have not administered an RESEA program during FY 2018)</p> <p><i>If proposal includes a request for up to \$100,000 in IT costs beyond the administrative cost limit described identify the amount requested and provide a brief summary describing the proposed activities and how they would benefit claimants.</i></p>	
<p>\$</p> <p style="text-align: center;"><b><i>-Insert description of additional IT activities -</i></b></p>	
<p>(9) Projected Average Cost for a <u>Single</u> Completed Initial RESEA</p> <p><i>States are expected to operate at an average cost per initial RESEA session between \$155 and \$175. States that are unable to operate within this ranges must provide an explanation for the higher costs.</i></p>	
<p>\$</p> <p style="text-align: center;"><b><i>-Include explanation if average projected cost per initial RESEA exceeds \$175-</i></b></p>	

<p>(10) Projected Average Cost for Subsequent RESEA, if applicable.</p> <p><i>States are expected to operate at an average cost per subsequent RESEA session between \$80 and \$100. States that are unable to operate within this range must provide an explanation for the higher costs.</i></p>	
<p>\$</p> <p align="center"><b><i>-Include explanation if average projected cost per subsequent RESEA exceeds \$100-</i></b></p>	
<p>(11) Projected Time for a <u>Single</u> Initial RESEA, Including Paperwork</p> <p><i>The total time spent preparing for and conducting a single initial RESEA, recording results, and other documentation.</i></p>	
<p>(12) Projected Time for the Subsequent RESEA, Including Paperwork</p> <p><i>The total time spent preparing for and conducting a single subsequent RESEA, recording results and other documentation. If times for the second and third RESEA are expected to differ please provide both.</i></p>	
<p>(13) Projected Costs for a Single RESEA for which the Claimant Fails to Report</p> <p><i>The total costs spent scheduling a single RESEA for which the claimant subsequently fails to report and referring the claimant to adjudication for failure to report. This estimate should not include the costs of adjudication, which are separately funded.</i></p>	\$
<p>(14) Total Number of Initial RESEAs to be Scheduled</p> <p><i>The total number of initial RESEAs that will be scheduled including both the RESEAs for which claimants are projected to report and the RESEAs for which claimants are projected to fail to report.</i></p>	

<p>(15) Total Number of Subsequent RESEAs to be Scheduled</p> <p><i>The total number of subsequent RESEAs that will be scheduled including both the RESEAs for which claimants are projected to report and the RESEAs for which claimants are projected to fail to report. (If the state does not conduct subsequent RESEAs this number will be zero.)</i></p>	
<p>(16) Total Number of RESEAs Projected to be Completed</p> <p><i>The total number of RESEAs the state will schedule during the grant period for which the claimant will report and participate in an RESEA.</i></p>	
<p>(17) Total Number of RESEAs Projected for which the Claimant Will Fail to Report</p> <p><i>The total number of RESEAs the state will schedule during the grant period for which the claimant will fail to report and will not participate in an RESEA.</i></p>	
<p>(18) Actions taken to reduce number of claimants failing to report.</p> <p><i>If the state has taken any actions in the past year and/or plans to carry out any actions in FY 2017, to reduce the number of claimants failing to report, please provide a brief description.</i></p> <p><b><i>–Insert description of activities taken to reduce claimants failing to report (Limit 500 words) –</i></b></p>	
<p>(19) Total number of RESEA Sites</p> <p><i>The total number of sites where RESEAs will be conducted. If RESEAs are conducted statewide, please indicate “statewide.” If RESEAs are provided at limited sites, list the towns/cities or local workforce areas where RESEA activities will be conducted.</i></p>	

***–Insert total number of sites and list of site locations if activities are not statewide- (Limit 500 words) –***

(20) Type of staff conducting RESEAs

*Description of the staff that will conduct the RESEAs. List all applicable program staff including: UI, Wagner-Peyser-funded Employment Services, WIOA formula programs, or other.*

(21) Role of UI Staff

*Briefly describe the role played by UI staff in program management. As discussed in UIPL, all eligibility determinations and redeterminations are funded through the regular funding for non-monetary determinations and not through the RESEA grant.*

***–Insert description of UI staff roles (Limit 250 words) –***

(22) Selection of RESEA Participants

*Describe how claimants are selected and at what point in the claim series selection are made. As directed in the UIPL the selection process. UI claimants who have a definite return-to-work date; claimants who secure work only through a union hiring hall; and claimants who are in approved training should be excluded from the RESEA program*

***–Insert description of how claimants are selected (Limit 250 words) –***

<p>(23) Description of RESEA</p> <p><i>Provide a brief description of the state’s initial and, if applicable, subsequent RESEA, including the elements of the RESEA and how the key components in this UIPL are implemented.</i></p>
<p align="center"><b><i>–Insert description of RESEAs (Limit 250 words) –</i></b></p>
<p>(24) Group or Individual</p> <p><i>Identify components, if any, of the RESEA activities provided in a group setting.</i></p>
<p align="center"><b><i>–Identify RESEA components conducted in a group (Limit 250 words) –</i></b></p>
<p>(25) Memorandum of Understanding (MOU)</p> <p><i>Is it signed and operational? (Yes or No)</i></p> <p><i>If no, provide the estimated date that the MOU will be signed and operational. New states should submit a copy of the MOU when it has been signed and continuing states should submit a copy of the MOU if it has changed.</i></p> <p><i>If yes, list all parties to the agreement.</i></p>
<p align="center"><b><i>–Insert status of MOU and members (Limit 250 words) –</i></b></p>

(26) UI Feedback Loop, Adjudication, and Due Process

*Provide a description of the following:*

- (1) Feedback loop from the American Job Center, or alternative location, to the UI system on whether the claimants reported as directed and participated in required activities;*
- (2) Feedback loop established to refer any UI eligibility issues identified in the eligibility review for adjudication; and*
- (3) Process for referring to adjudication UI claimants selected for RESEAs who fail to report for the RESEA without contacting the agency.*

***-Insert description of processes for UI feedback loop, adjudication, and due process-***

(27) Planned Supplemental Activities if Additional Funding is Available.

*If the State has capacity and need for funding beyond the provided maximum level identified in Attachment I, please provide:*

- (1) The amount of additional funds requested;*
- (2) The number of additional sites, if any there would be served using the increased funds*
- (3) The estimated number of additional scheduled and completed RESEAs that would be conducted.*
- (4) Any additional activities or program enhancements that will be implemented, if applicable.*

***-Insert description of funding needed, additional sites services, and scheduled/completed RESEAs supported  
(Limit 500 words-)***

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