OMB Control Number: 1205-0040
Expiration Date: XX/XX/XXXX

Sub-State Data in Support of SCSEP Grantee PY [Insert Year] Goal Negotiation

Grantee: _____ **Date Submitted:** _____

Use this form to submit data by county in support of your proposed goals. You must list each county that you serve in the relevant state(s) (column A) and the number of authorized positions you have in each county (column B). Please identify in columns F-I the program year, program quarter, or months as applicable and the name of the factor for which you are submitting data, e.g., unemployment rate for Hispanics. You may add addtional columns as needed. All data sources must be documented.

					Q [Insert Quarter] PY[Insert Year] Months [Insert Months] Rate*			
List Each County in Each State Served	Authorized Positions for Current PY [Insert Year]	Calendar Year [Insert Year] [Insert Factor] Rate	Calendar Year [Insert Year] [Insert Factor] Rate	Calendar Year [Insert Year] [Insert Factor] Rate	Quarterly [Insert Factor] Rate	Month [Insert Month] Rate	Month [Insert Month] Rate	Month [Insert Month] Rate

*All data sources must be documented

** Indicate whether monthly or quarterly rates

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. Public reporting burden for this collection of information is estimated to average 3 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is *required (PL 114-144 Section 513)* Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of Workforce Investment, Room C-4510, 200 Constitution Avenue, NW, Washington, DC 20210 and reference the OMB Control Number. Note: Please do not return the completed ETA 9180B to this address.

Goal Negotiation Calls

May-14

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
AM PM			15 AM PM	16 AM PM
19 AM PM	20 AM PM	21 AM PM	22 AM PM	23 AM PM
26 HOLIDAY	27 AM PM	28 AM PM	29 AM PM	30 AM PM