

## CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

**APPLICATION SUMMARY** Submit common description to each revenue source.

<b>ORGANIZATION NAME</b>	Wisconsin Youth Company, Inc.		
<b>MAILING ADDRESS</b> <small>If P.O. Box, include Street Address on second line</small>	1201 McKenna Blvd. Madison, WI 53719		
<b>TELEPHONE</b>	608-276-9782	<b>LEGAL STATUS</b>	
<b>FAX NUMBER</b>	608-276-4050	<input checked="" type="checkbox"/> Private, Non-Profit <input type="checkbox"/> Private, For Profit <input type="checkbox"/> Other: LLC, LLP, Sole Proprietor	
<b>NAME CHIEF ADMIN/ CONTACT</b>	Nancy Goodell	Federal EIN: <u>23-7401836</u>	
<b>INTERNET WEBSITE (if applicable)</b>	www.wisconsinyouthcompany.org	State CN: _____	
<b>E-MAIL ADDRESS</b>	ngoodell@wisconsinyouthcompany.org		

**PROGRAM LISTING** Please list all programs your organization provides (including those which are not funded through this process). Use the same letter throughout the application to identify the programs for which you are requesting funding, consistent with prior years.

PROGRAM NAME	PROGRAM CONTACT PERSON	PHONE NUMBER	E-MAIL
A: Facility Use	Marylou Grzadzielewski	276-9782	<a href="mailto:mlgrad@wisconsinyouthcompany.org">mlgrad@wisconsinyouthcompany.org</a>
B:			
C:			
D:			
E:			
F:			
G:			
H:			
I:			
J:			

For or larger organizations use letters A-K for programs which seek funding through this common application process and attach a list or summary in row K for other programs your organization offers.

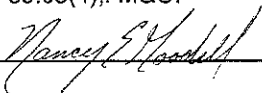
**REVENUE** Columns 2, 3, and 4 describe **total** agency revenue for a calendar year. Distribute column 4 across the program columns A-K. Identify with an asterisk (\*) all funding requests which are duplicative in nature. You may change a row heading to make it applicable to your agency. See the INSTRUCTION SECTION for greater detail.

REVENUE SOURCE	2) 2007 ACTUAL	3) 2008 BUDGET	4) 2009 PROPOSED	2009 PROPOSED PROGRAMS			
				A	B	C	D
DANE CO HUMAN SVCS	8,827	12,327	12,327	\$8,827			
DANE CO CDBG	0	0	0				
MADISON- COMM SVCS	30,000	85,480	88,899				
MADISON- CDBG	70,000	50,818	52,851	\$52,851			
UNITED WAY ALLOC	1,159	260	260				
UNITED WAY DESIG	0	0	0				
OTHER GOVT	0	0	0				
FUND RAISING DONATIONS	29,056	32,050	36,000	\$2,750			
USER FEES	4,330,055	4,395,213	4,571,022	\$3,500			
OTHER	83,576	76,966	76,985	\$61,369			
<b>TOTAL REVENUE</b>	<b>4,552,673</b>	<b>4,653,114</b>	<b>4,838,344</b>	<b>\$129,297</b>			

2009 PROPOSED PROGRAMS							
REVENUE SOURCE	E	F	G	H	I	J	K
DANE CO HUMAN SVCS							
DANE CO CDBG							
MADISON- COMM SVCS							
MADISON- CDBG							
UNITED WAY ALLOC							
UNITED WAY DESIG							
OTHER GOVT							
FUND RAISING DONATIONS							
USER FEES							
OTHER							
<b>TOTAL REVENUE</b>							

**Affirmative Action:** If funded, applicant hereby agrees to comply with City of Madison Ordinance 39.02 and file either an exemption or an affirmative action plan with the Department of Civil Rights. A Model Affirmative Action Plan and instructions are available at [www.cityofmadison.com/dcr/aaForms.cfm](http://www.cityofmadison.com/dcr/aaForms.cfm)

**Non-Discrimination Based on Disability:** Applicant shall comply with Section 39.05, Madison General Ordinances, Nondiscrimination Based on Disability in City-Assisted Programs and Activities. Under Section 39.05(7) of the Madison General Ordinances, no City financial assistance shall be granted unless an Assurance of Compliance with Sec. 39.05 is provided by the applicant or recipient, prior to granting of the City financial assistance. Applicant hereby makes the following assurances: Applicant assures and certifies that it will comply with Sec. 39.05 of the Madison General Ordinances, entitled "Nondiscrimination Based on Disability in City Facilities and City-Assisted Programs and Activities," and agrees to ensure that any subcontractor who performs any part of the agreement complies with Sec. 39.05, where applicable, including all actions prohibited under Sec. 39.05(4), MGO."

Signed: 

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## PROGRAM DESCRIPTION

ORGANIZATION: Wisconsin Youth Company

PROGRAM: Wisconsin Youth & Family Center(WYFC)--Facilities Use  
(Submit only to relevant revenue sources.)

PROGRAM LETTER: A  
(from App Summary Page A)

- A. **PROGRAM OVERVIEW** Briefly summarize the program being provided (or proposed), including the need being addressed, the program's goals, and the impact of the program. (Word limit: 150 words)

WYFC continues to serve residents of southwest Madison, an area with growing resident, business and police concerns about crime and poverty. The center has 13 vendor organizations (up from 9 in 2007) delivering services to neighborhood residents including Scouts, karate classes, GIRLS Inc. and others. The center is home to a subsidized after school program serving 22 elementary age children, On Track alternative high school program, African American Ethnic Academy and more. Program goals: 1) increase overall attendance at center, 2) expand services for middle and high school youth 3) involve more neighborhood residents in the center through community building activities.

- B. **PARTICIPANT DEMOGRAPHICS** Complete the following chart for unduplicated participants served by this program *in 2007*. Indicate the number and percentage for the following characteristics. If you do not collect information using these age categories, use your own age category descriptors. For new programs, please estimate participant numbers and descriptors.

PARTICIPANT DESCRIPTOR	NUMBER	PERCENT	PARTICIPANT DESCRIPTOR	NUMBER	PERCENT
<b>TOTAL</b>		<b>100%</b>	<b>TOTAL PARTICIPANTS BY RACE</b>		<b>100%</b>
MALE	160		WHITE	150	
FEMALE	150		BLACK	132	
<b>AGE</b>		<b>100%</b>	NATIVE AMERICAN		
			ASIAN/PACIFIC ISLANDER	8	
2 - 5	12		MULTI-RACIAL	20	
6 - 12	77		<b>ETHNICITY</b>		<b>100%</b>
13 - 17	85		HISPANIC		
18 - 29	60		NON-HISPANIC	310	
30 - 59	57		<b>HANDICAPPED (persons with disabilities)</b>		
60 - 74	17		<b>RESIDENCY</b>		<b>100%</b>
75 & UP	2		CITY OF MADISON	280	
			DANE COUNTY (NOT IN CITY)	20	
			<b>OUTSIDE DANE COUNTY</b>	10	

**Note:** Simple racial and ethnic categories are inadequate to describe the heritage of many people. Please fit client data to the categories above as closely as possible.

**PROGRAM:** Wisconsin Youth & Family Center—Facilities Use  
 (Submit only to relevant revenue sources.)

**PROGRAM LETTER:** A

C. Describe the participants to be served; e.g. age, income level, limited English proficiency or needing language accommodations, or accessible service locations.

Families living in SW Madison, primarily persons of color and low-income persons are the target group. About half of the youth population lives in single parent homes; about half are African American and the majority of them are poor with 70 percent receiving free/reduced lunch. In March 2006 there were about 590 families categorized as poor (receiving public assistance of some type.)

**D. PROGRAM OUTCOMES**

310 Number of unduplicated individual participants served during 2007.

N/A Number of unduplicated participants who completed the program during 2007 (if applicable).

Complete the following for each program outcome. No more than **two outcomes per program** will be reviewed. Refer to the Instructions for detailed descriptions of what should be included in the table below.

<b>OUTCOME OBJECTIVE # 1</b>		Improve youth academics, strengthen families and build community through skill-based classes, recreation and neighborhood events.				
<b>Performance Indicator(s)</b>		Youth attendance at Homework Club will increase 25 percent. Total center attendance will increase by 100 unduplicated individuals. Attendance at Family Nights will increase by 25 percent. At least 200 neighborhood residents will attend four special events.				
<b>Explain the measurement tools or methods.</b>		Attendance will be tracked at all classes and events. Participants will fill out evaluations to assess classes, events and programs. Vendors will provide services data on a quarterly basis. Youth school performance will be tracked.				
<b>Target Proposed for 2009</b>	Total to be served	400	Targeted <u>percent</u> to meet performance indicator(s)	75	Number to meet indicators(s)	300
<b>Target Proposed for 2010</b>	Total to be served	500	Targeted <u>percent</u> to meet performance indicator(s)	75	Number to meet indicators(s)	350
<b>OUTCOME OBJECTIVE # 2</b>						
<b>Performance Indicator(s)</b>						
<b>Explain the measurement tools or methods.</b>						
<b>Target proposed for 2009</b>	Total to be served		Targeted <u>percent</u> to meet performance indicator(s)		Number to meet indicator(s)	
<b>Target proposed for 2010</b>	Total to be served		Targeted <u>percent</u> to meet performance indicator(s)		Number to meet indicator(s)	

**PROGRAM:** Wisconsin Youth & Family Center—Facility Use  
(Submit only to relevant revenue sources.)

**PROGRAM LETTER:** A

E. **PROGRAM ACTIVITIES** In the space below, describe the strategies and program activities used to achieve each of the program outcomes. (These usually include a description of what services your staff and volunteers deliver to achieve your outcomes.)

Outcome #1

The outreach division of Wisconsin Youth Company will promote center programs and encourage attendance by meeting with representatives from schools, businesses and organizations serving southwest Madison. New activities for middle and high school youth will be promoted to attract them to the center. Six additional vendors will be recruited to provide 12 new programming opportunities to youth and families. Community events such as Family Nights, cookouts and arts events will be organized and promoted by the Community Outreach Coordinator.

Outcome #2

**PROGRAM:** Wisconsin youth & Family Center—Facility Use  
 (Submit only to relevant revenue sources.)

**PROGRAM LETTER:** A

F. **PROGRAM BUDGET 2008 ESTIMATED OPERATING BUDGET and 2009 Proposed Budget** (You may change row headings to make them applicable to your organization.)

ACCOUNT CATEGORY Source	2008 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	\$8,827	\$3,267	\$5,060	\$500	
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG	\$50,818	\$32,245	\$12,279	\$6,294	
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	\$2,500	\$2,500			
USER FEES	\$3,375	\$2,232	\$1,143		
OTHER	\$59,525	\$35,687	\$18,964	\$4,874	
<b>TOTAL</b>	<b>\$125,045</b>	<b>\$75,931</b>	<b>\$37,446</b>	<b>\$11,668</b>	

ACCOUNT CATEGORY Source	2009 REVENUE SOURCE TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV	\$8,827	\$3,267	\$5,060	\$500	
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG	\$52,851	\$33,534	\$12,770	\$6,547	
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING	\$2,750	\$2,750			
USER FEES	\$3,500	\$1,350	\$2,150		
OTHER	\$61,369	\$38,067	\$18,214	\$5,088	
<b>TOTAL</b>	<b>\$129,297</b>	<b>\$78,968</b>	<b>\$38,194</b>	<b>\$12,135</b>	

G. **2009 COST EXPLANATION** (Complete only if significant financial changes are anticipated between 2008 and 2009.) Explain specifically, by revenue source and/or account category, any noteworthy change in the 2009 request. For example, unusual cost increase, program expansion, Living Wage requirements, or loss of revenue.

**PROGRAM:** Wisconsin Youth & Family Center—Facility Use  
 (Submit only to relevant revenue sources.)

**PROGRAM LETTER:** A

H. **PARTICIPANT COST** This chart requests unit and participant/client costs for this program only. For column 4) divide column 2) by column 3). For column 6) divide column 2) by column 5).

	2) TOTAL COST OF PROGRAM	3) UNDUPLICATED PARTICIPANTS	4) COST PER PARTICIPANT	5) UNITS PROVIDED	6) UNIT COST
2007 ACTUAL	\$148,495	310	\$479	3079.5	\$48
2008 BUDGETED	\$125,045	400	\$313	3825	\$33
2009 PROPOSED	\$129,297	450	\$288	3595	\$36

I. **SERVICE UNITS** Define the 2009 Proposed Units Provided in column 5) in the Unit Cost table above. Wherever possible use the unit of service requested by a revenue source.

A unit is a single hour of program or activity in the facility.

J. **UNDUPLICATED PARTICIPANT** How does your agency define an unduplicated participant in this program (e.g., a youth who enrolls in a 4-week summer program, or a senior who receives care management services during the year, or a monthly visitor to a neighborhood center)?

An unduplicated participant is a youth or adult participating in a program or WYFC-sponsored event or meeting that occurs at the center.

**2010 SECOND YEAR FUNDING SUPPLEMENT**

*USE only if applying to City of Madison OCS or City of Madison CDBG*

If you are requesting only a COLA increase in 2010, indicate by check the box on the left and skip sections K, L and M. If you are requesting increased funding beyond a COLA, complete Sections K through M.

K. **PROGRAM UPDATE** 1) Describe any major changes being proposed for the program/service in 2010, i.e., expansions or narrowing in target population, scope and level of services, geographic area to be served, etc.).

L. **2010 PROPOSED BUDGET**

2010 PROPOSED BUDGET					
ACCOUNT CATEGORY	2010 PROPOSED BUDGET TOTAL	PERSONNEL	OPERATING	SPACE	SPECIAL COSTS
DANE CO HUMAN SERV					
DANE CO CDBG					
MADISON COMM SERV					
MADISON CDBG					
UNITED WAY ALLOC					
UNITED WAY DESIG					
OTHER GOVT					
FUND RAISING					
USER FEES					
OTHER					
TOTAL					

M. **2010 COST EXPLANATION** Explain specifically, by revenue source, any financial changes that you anticipate between 2009 and 2010.

# CITY-COUNTY CONSOLIDATED APPLICATION FOR 2009 & 2010 FUNDS

## ORGANIZATIONAL PROFILE

ORGANIZATION Wisconsin Youth Company, Inc.

(Submit to all revenue sources.)

## AGENCY INFORMATION

1. **MISSION STATEMENT** Describe your agency's mission in the space provided.

Wisconsin Youth Company exists so that the children of Wisconsin benefit from communities that nurture them at a sustainable cost: 1) There are safe and secure places to be a child outside home and school. 2) Caring adult role models regularly interact with children. 3) Children value themselves, others, and their environment. 4) There is encouragement and support for community engagement. 5) Resources are available for children to explore and pursue their individual interests. 6) Resources are available for children's educational support and enrichment.

2. **SERVICE IMPROVEMENT** Describe any recent initiatives or best practices, programmatically or administratively, that have improved your agency's ability to deliver services.

Administratively, the organization determined to begin upgrading its fleet of six 15 passenger vans with small buses allowing for greater transportation flexibility and safety. This year a soundproof divider was installed in the gymnasium to allow two groups to use that prime program space at the same time. The computer lab, the program kitchen, the art room, and even the corridors were upgraded and enhanced to provide improved program use and a more welcoming environment for the community users of the facility. Administrative staff continues only a minimal expansion as the organization's efforts have always focused on the quality and support of program staff who interact directly with the young people and their families. Most recently, WYC has expanded the program staff employed by its outreach division serving southwest Madison. This effort is aimed at expanding the facility's availability to the community and allowing staff to better connect with the community from which the youth participants are drawn.

3. **EXPERIENCE AND QUALIFICATIONS** Describe (in the space provided) the experience and qualifications of your agency related to the proposed programs.

Wisconsin Youth Company, Inc, incorporated in 1974, has focused its purpose and its activities on enriching, safe, and nurturing programs for school age children. It has grown from a single service- after school programming organization to a multi-service and division non-profit organization serving more than 2,500 families in Dane and Waukesha Counties. In 1998 the organization purchased the former Eagle School on McKenna Blvd. providing quality program space and options. Due to recent support for and interest in programming for youth in southwest Madison that facility offers most of its programs free of charge to community residents. Those programs include a school- year after school program, a summer day camp, a summer leadership program for middle schoolers and, new this year, drop-in programs for middle schoolers and high schoolers. WYC's administrative and management staff is diverse and exceptionally qualified to assume more active roles in the development of community programs including activities. WYC's Board of Directors is 100% supportive of community outreach programming and is currently organizing a significant effort to dialogue with the communities the organization serves in order to better meet the needs of its constituency.

4. **AGENCY GOVERNING BODY** How many Board meetings has your governing body or Board of Directors scheduled for 2008? 11

Please list your current Board of Directors or your agency's governing body. Include names, addresses, primary occupation and board office held. If you have more members, please copy this page.

<b>Board President's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	<b>Carolyn Hogg</b> <b>2145 West Lawn Ave.,</b> <b>Madison, WI 53711</b> <b>Attorney,</b> <b>City of Madison</b> <b>2004-2009</b>	<b>Board Vice-President's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	<b>Laurie S. Frank</b> <b>1337 Jenifer St.,</b> <b>Madison, WI 53703</b> <b>Owner,</b> <b>Goal Consulting</b> <b>2003-2008</b>
<b>Board Secretary's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	<b>Kia Karlen</b> <b>945 Fair Oaks Ave.,</b> <b>Madison, WI 53704</b> <b>Outreach Director,</b> <b>Madison Children's Museum</b> <b>2004-2009</b>	<b>Board Treasurer's Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	<b>Laurie S. Frank</b> <b>1337 Jenifer St.,</b> <b>Madison, WI 53703</b> <b>Owner,</b> <b>Goal Consulting</b> <b>2003-2008</b>
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	<b>Andrea Potter</b> <b>80 Burourghs Dr.,</b> <b>Fitchburg, WI 53713</b> <b>Development Director,</b> <b>The Progressive</b> <b>2006-2008</b>	<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	<b>Susan Caldwell</b> <b>W11030 Thistledown Dr</b> <b>Madison, WI 53555</b> <b>Attorney,</b> <b>WPS Health Insurance</b> <b>2007-2009</b>
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	<b>Arlington Davis</b> <b>7002 New Washburn Way</b> <b>Madison, WI 53719</b> <b>Administrator,</b> <b>W.P.S.</b> <b>2005-2010</b>	<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	<b>Suzanne Stute</b> <b>122 Nygard St., Madison, WI</b> <b>53713</b> <b>Consultant,</b> <b>Family Services</b> <b>2006-2008</b>
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	<b>Julianne Wilke</b> <b>1224 Drake St. #2, Madison,</b> <b>WI 53715</b> <b>Social Worker,</b> <b>M.M.S.D.</b> <b>2005-2010</b>	<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	<b>Nancy Goodell (Ex-Officio,</b> <b>Non-voting)</b> <b>N5884 Willow Glen Rd.,</b> <b>Sullivan, WI 53178</b> <b>Executive Director,</b> <b>Wisconsin Youth Company,</b> <b>Inc.</b>
<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>		<b>Name</b> <b>Home Address</b> <b>Occupation</b> <b>Representing</b> <b>Term of Office:</b> <b>From __ To __</b>	

## STAFF-BOARD-VOLUNTEER DESCRIPTORS

**STAFF/BOARD/VOLUNTEERS DESCRIPTORS** For your agency's 2007 staff, board and volunteers, indicate by number and percentage the following characteristics.

DESCRIPTOR	STAFF		BOARD		VOLUNTEER	
	Number	Percent	Number	Percent	Number	Percent
<b>TOTAL</b>	196	100%	8	100%	40	100%
<b>GENDER</b>						
MALE	30	15.3%	1	12.5%	10	25%
FEMALE	166	84.7%	7	87.5%	30	75%
<b>AGE</b>						
LESS THAN 18 YRS	2	1%	0	0%	0	0%
18 – 59 YRS	186	95%	7	87.5%	40	100%
60 AND OLDER	8	4%	1	12.5%	0	0%
<b>RACE</b>						
WHITE	175	89.3%	6	75%	35	87.5%
BLACK	10	5.1%	1	12.5%	1	2.5%
NATIVE AMERICAN	0	0%	0	0%	0	0%
ASIAN/PACIFIC ISLE	3	1.5%	0	0%	1	2.5%
MULTI-RACIAL	8	4.1%	1	12.5%	3	7.5%
<b>ETHNICITY</b>						
HISPANIC	6	3%	0	0%	3	7.5%
NON-HISPANIC	190	97%	8	100%	37	92.5%
<b>HANDICAPPED*</b> (Persons with Disabilities)	0	0%	0	0%	0	0%

\* Refer to definitions on page 3 of the instructions.

**BUDGET TOTAL OPERATING EXPENSES**

5. **AGENCY EXPENSE BUDGET** This chart describes your agency's total expense budget for 3 separate years. Where possible, use audited figures for 2007 Actual. Use current budget projections for 2008 Budget.

<b>ACCOUNT DESCRIPTION</b>	<b>2007 ACTUAL</b>	<b>2008 BUDGET</b>	<b>2009 PROPOSED</b>
<b>A. PERSONNEL</b>			
Salary	\$2,346,908	\$2,404,653	\$2,486,792
Taxes	\$178,484	\$183,514	\$188,237
Benefits	\$276,317	\$283,496	\$294,836
<b>SUBTOTAL A:</b>	<b>\$2,801,709</b>	<b>\$2,871,663</b>	<b>\$2,969,865</b>
<b>B. OPERATING</b>			
All "Operating" Costs	\$1,486,850	\$1,453,942	\$1,500,379
<b>SUBTOTAL B</b>	<b>\$1,486,850</b>	<b>\$1,453,942</b>	<b>\$1,500,379</b>
<b>C. SPACE</b>			
Rent/Utilities/Maintenance	\$126,171	\$133,079	\$167,372
Mortgage (P&I)/Depreciation/Taxes	\$137,124	\$126,415	\$122,985
<b>SUBTOTAL C</b>	<b>\$263,295</b>	<b>\$259,494</b>	<b>\$290,357</b>
<b>D. SPECIAL COSTS</b>			
Assistance to Individuals	\$13,781	\$17,540	\$25,456
Subcontracts, etc.	\$37,035	\$41,575	\$43,337
Affiliation Dues	\$8,778	\$8,900	\$8,950
<b>SUBTOTAL D</b>	<b>\$59,594</b>	<b>\$68,015</b>	<b>\$77,743</b>
<b>TOTAL OPERATING EXPENSES A-D</b>	<b>\$4,601,448</b>	<b>\$4,653,114</b>	<b>\$4,838,344</b>
<b>E. TOTAL CAPITAL EXPENDITURES</b>	<b>\$54,446</b>	<b>\$0</b>	<b>\$0</b>

**7. PERSONNEL SCHEDULE**

- Column 1) each individual staff position by title.
- Columns 2) and 4) indicate the number of Full Time Equivalents (FTEs) in each staff position.
- Columns 3) and 5) indicate the total salaries for all FTEs in that staff position. Do not include payroll taxes or benefits in this table.
- Columns A-K distribute column 4) (2008 FTEs) across all agency programs.

**PLEASE NOTE** COLUMNS A-K are FTEs, NOT dollar amounts.

Continue on page 6 if you have more than five (A-E) programs.

1) STAFF POSITION/ CATEGORY	2008 ESTIMATED		2009 PROPOSED		2009 PROPOSED FTE'S DISTRIBUTED BY PROGRAM				
	2) FTE	3) TOTAL SALARY	4) FTE	5) TOTAL SALARY	A	B	C	D	E
Program A Center Director	1.0	\$30,132	1.0	\$31,035	1.0				
Program A Center staff	.75	\$17,035	.75	\$17,546	.75				
Program A Center staff	.4	\$10,216	.4	\$10,861	.5				
Program A Center staff	.4	\$10,216	.4	10,861	.5				
<b>TOTAL</b>	2.55	\$67,599	2.55	\$70,303					



Insert Center            here

Column 1	Column 2	Column 3	Column 4	Column 5
Specific Project Objectives	2007 Actual	2008 Goal	2009 Proposed	2010 Proposed
FACILITY USE AND CORE				
SPONSORED CHILDREN/YOUTH HOURS	2,377.00 hours	2,700 hours	2,750.00 hours	2,775 hours
SPONSORED ADULT/FAMILY HOURS	408.00 hours	800 hours	500.00 hours	550 hours
SPONSORED SENIOR HOURS	173.50 hours	150 hours	150.00 hours	165 hours
OPTIONAL HOURS	21.00 hours	50 hours	60.00 hours	70 hours
MEETING SPACE HOURS	99.00 hours	125 hours	135.00 hours	145 hours
TOTAL FACILITY USE HOURS	3,079.50 hours	3,825 hours	3,595.00 hours	3,705 hours
YTD FACILITY USE UNDUPLICATED PARTICIPANTS	310 prtpts	400 prtpts	400 prtpts	450 prtpts
TOTAL YTD CENTER UNDUPLICATED PARTICIPANTS	132 prtpts	150 prtpts	175 prtpts	200 prtpts
*PROGRAM:Elementary After School--School Year				
SERVICE 38 weeks	200.00 units	1,140 units	1,216.00 units	1,216 units
YTD UNDUPLICATED PARTICIPANTS	20 prtpts	30 prtpts	32 prtpts	32 prtpts
*PROGRAM:Elementary Summer				
SERVICE 10 weeks	N/A units	200 units	200.00 units	250 units
YTD UNDUPLICATED PARTICIPANTS	N/A prtpts	20 prtpts	20 prtpts	25 prtpts
*PROGRAM:Teen Drop In School Year				
SERVICE 165 days (95 days '08)	N/A units	2,850 units	8,250.00 units	9,900 units
YTD UNDUPLICATED PARTICIPANTS	N/A prtpts	30 prtpts	50 prtpts	60 prtpts
*PROGRAM:D Teen Drop-In Summer				
SERVICE 44 days	N/A units	2,200 units	2,640.00 units	3,080 units
YTD UNDUPLICATED PARTICIPANTS	N/A prtpts	50 prtpts	60 prtpts	70 prtpts

\*Enter program names in Column 1 as listed on Application Summary - Page A of the Consolidated Application. All programs provided by the center must be detailed on this form. Add additional pages as necessary (i.e. Program D, Program E, etc.)  
 Enter the defined service unit for each program letter in Column 1 as defined on Program Description - Page 5 of the Consolidated Application.  
 Enter the number of units and number of participants completed/served in 2007 in Column 2.  
 Enter the number of units and number of participants completed/served proposed in Columns 3, 4, and 5.