

LDSS EDGE Transition Program Summary
 _____ County Department of Social Services

LDSS Contact Person: _____ Telephone: _____

1. List your EDGE Transition program provider agencies and the amount of your EDGE Transition program allocation awarded to each:

| <u>Provider Agency</u> | <u>EDGE Transition Allocation</u> | | |
|------------------------|-----------------------------------|--------------------|--------------|
| | <u>Non-EPE Portion</u> | <u>EPE Portion</u> | <u>Total</u> |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| Total | _____ | _____ | _____ |

2. Please summarize below projected enrollments and expenditures by activity.

| <u>Activity</u> | <u>Projected Number to be Served by Activity</u> | <u>Projected Expenditure by Activity Including EPE</u> |
|-------------------------------------|--|--|
| Assessment/EP | _____ | _____ |
| Education | _____ | _____ |
| Job Skills Training | _____ | _____ |
| Job Readiness Training | _____ | _____ |
| Job Development/Placement | _____ | _____ |
| Community Work Experience (CWEP) | _____ | _____ |
| ADC Work Supplementation (ADC TEAP) | _____ | _____ |
| Case Management | _____ | _____ |
| **Work Based Activities | _____ | _____ |

3. a. Please specify the total number of individuals you plan to serve in EDGE-funded activities (unduplicated). (_____)
- b. How many activities above do you plan to provide as EDGE funded activities which are 20 hours or more? _____
- c. How many activities above do you plan to provide as EDGE funded activities which are less than 20 hours? _____
4. Please specify the total EE target (sum of all providers). _____
 Direct Job Placement _____ Job Skills Training _____

**** Work based activities are not stand-alone activities. They must be done in conjunction with Education, Job Skills Training, or Job Readiness Training. Numbers to be enrolled in work based activities will include enrollments in these activities.**

5. Please identify on a separate page, provider agencies which will offer stand-alone components and the name of the components. All such stand-alone components must be integrated with work based activities or job readiness by the second quarter (January 2, 1996).