

Arkansas Department of Human Services

**COMMUNITY SERVICES BLOCK GRANT (CSBG)
Discretionary Grant Budget Instructions**

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Submission Instructions:

Complete all submission forms and submit the 2020 Budget in MS Excel format only **(DO NOT convert the budget form to a PDF format.)**

The Preparer and Approver must sign the Summary Page.

Discretionary Budget Workbook

Please enter the requested information into the yellow highlighted cells. All subtotals and totals auto-calculate.

Summary Page

- **Enter name of the applicant on the summary page.** This information will populate entire workbook
- **Service Area:** List all counties in the applicant service area
- **CSBG Allocation:** Enter the amount of funds requested for the discretionary application

NOTE: DO NOT ENTER ANY INFORMATION ON SUMMARY PAGE FOR BUDGET CATEGORIES. THIS WILL POPULATE FROM WORKSHEETS.

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Personnel and Fringe costs apply only to the Training One Category

Personnel B.1 – Budget Support Sheet B.1

Section 1: Administrative & Management Staff

- Identify and enter the CSBG Administrative and Management staff position (not staff name)
Example: Executive Director, CFO, HR, Accounting, IT, Admin Assistant, Program Manager (administrative duties), etc.
- Enter the number of months this staff position is supported by CSBG
- Enter the annual salary of this staff position
- Enter the percent of CSBG support
- If you have an Indirect Cost Rate, verify that Administrative or Management Staff reflected in B.1 are not covered by your Indirect Cost Rate.

Section 2: Program Staff/Direct Client Support Staff

- Identify and enter the Program Staff/Direct Client Support Staff position (not staff name.)
Example: Case Worker, Program Manager (working directly with clients or planning or coordination functions), Coordinator, Client Specialist, Program Specialist, Intake Worker, CSBG Planning and Coordination Staff, etc.
- Enter the number of months this staff position is supported by CSBG
- Enter the annual salary of this staff position
- Enter the percent of CSBG support

Section 3: CSBG Support for Other Programs

- Identify and enter the Program, Direct Client Support Staff position (not staff name.) Example: Client Specialist, Program Specialist, staff who work directly with clients, etc.
- Enter the number of months this staff position is supported by CSBG
- Enter the annual salary of this staff position
- Enter the percent of CSBG support

Fringe Benefits – Budget Support Sheet B.2

Administrative & Management Staff

Enter the CSBG related costs budgeted for staff positions on Personnel B.1. **DO NOT** provide percentages but break down each cost.

- F.I.C.A.
- Unemployment Insurance
- Workman's Comp Insurance
- Health Insurance
- Dental Insurance
- Life Insurance
- Retirement Contribution
- Other: List any other related fringe benefits costs

Travel – Budget Support Sheet B.3

Enter the CSBG related costs budgeted for:

- Local travel (miles and rate). **This rate may not exceed the CURRENT APPROVED state rate**
- Per diem
- Non-local travel

Equipment – Budget Support Sheet B.4

CSBG Equipment. There are separate sections for Purchases and Leases, in each section enter the:

- Equipment description
- Number of units
- Information on the brand and model
- Total Unit cost (not just the CSBG portion)
- Percentage budgeted to CSBG

Supplies – Budget Support Sheet B.5

Supplies include, but not limited to electronic computers, printers, printer ink, paper, etc.

Contractual – Budget Support Sheet B.6

Enter the CSBG related costs budgeted that are the costs requiring a contract (excluding equipment):

- Legal Services,
- Audit Services,
- Accounting Services and/or
- Other Costs. Example: contracts for janitorial service, security services, computer maintenance or user fee costs.
- Total Cost (not just CSBG portion)
- Percentage budgeted to CSBG

Other Office Expenses – Budget Support Sheet B.7

Other expenses include **rent for facilities, ALL insurance, utilities, computer software, telephone, internet, vehicle maintenance, publications, copying, etc.**

Enter the:

- Other Items related to the CSBG program.
- Total Costs
- Percent budgeted to CSBG

Client Services – Budget Support Sheet B.8

No personnel costs are to be entered in this section

Direct Services to Case Management Clients to Transition into Self-Sufficiency or Transition Out of Poverty

- Enter the amount of funds budgeted for Direct Services for Case Management Clients working to transition into Self-Sufficiency or Transition Out of Poverty.
- The funds for TOP client assistance are for services to assist case managed clients obtain education and/or employment to transition into Self-Sufficiency or transition out of poverty. These funds are specifically for employment, education and removing barriers for employment. Examples: **testing fees, certification costs, uniforms, equipment/tools for employment, transportation to/from school/work, etc. and can include assistance with rent and other expenses for persons receiving case management/family development services to Transition Out of Poverty or to Transition to Self-Sufficiency.**
- Include a copy of the board approved Transition into Self-Sufficiency/Transition Out of Poverty Plan for CSBG funds

Emergency Assistance/Direct Services to Clients not working towards Self-Sufficiency or Transition Out of Poverty

- Enter the specific types of assistance to be provided or just enter miscellaneous emergency assistance/direct services that may be provided. This is client assistance to stabilize families or persons who are not working to TOP and to assist them with emergency assistance such as rent, food, transportation, medical related costs, etc.
- Enter the Total Costs
- Enter the percent budgeted to CSBG
- Include a copy of the board approved Emergency Services Plan for CSBG funds