



Content of Adult Basic Education Direct Service Grant Application

Demonstrated effectiveness to determine eligibility

Applicant(s)

Enter the full name of the grant applicant. In the case of a consortium or coalition of agencies, each agency in the consortium/coalition must be entered separately.

Evidence of demonstrated effectiveness

Each of the entities listed above under Applicant(s) must provide a completed copy of the appropriate Demonstrated Effectiveness Table form. The forms are located on the [Division of Adult Education Grant Competitions webpage](#). Each entity listed above in the Applicant(s) section must download and fill out its own appropriate table. The file should be saved using the following naming convention: “[Applicant Name] Demonstrated Effectiveness”. The grantee (or main grantee in the case of a consortium or coalition of agencies) must upload each of the completed tables below. To upload the files, click on the “Upload File” button. Find the desired file on your computer and select it. Uploaded files will appear in the table under the Upload File button.

Narrative

Proposed service area and description of need

1. Identify the proposed service areas.

Help button text: *(Maximum 500 characters) The answer must identify the local workforce area(s) the applicant proposes to serve. If the local workforce area comprises multiple counties, identify the counties the applicant proposes to serve. Identify the specific sections*

of the local area, counties, and population centers in which the applicant will locate its services.

2. Describe the need for adult basic education services in the proposed service areas.

Help button text: *(Maximum 3000 characters) The applicant must provide sufficient relevant, up-to-date, quantitative, and qualitative data from multiple cited sources to demonstrate the need for division-funded adult basic education services in the proposed service areas. The answer must also include an explanation of how the data demonstrate need. Data without explanation will be scored as an incomplete answer. The information in this answer should align with the answer to Alignment with Workforce question 1 and will be considered in the local board review of adult basic education applications for alignment with the local plan.*

Agency structure and capacity

1. Describe how the program administrator responsible for day-to-day oversight of the adult basic education program will provide leadership that will ensure quality of instruction, accurate data management, sound fiscal accounting, appropriate program improvement and professional development, and adherence to federal and state laws and regulations, and Pennsylvania Department of Education and Division of Adult Education policies and guidelines.

Help button text: *(Maximum 2000 characters) In addition to addressing all of the items listed in the question, the answer must also include information on the amount of time the program administrator has to fulfill these duties as well as evidence of support from the larger agency and/or board of directors to fulfill these duties. Applicants that are a consortium or coalition of agencies should describe how the main grantee will provide oversight and work with subgrantees to address the items listed.*

2. Describe the applicant's financial management system and internal controls to ensure fiscally sound and compliant use of grant funds.

Help button text: *(Maximum 2500 characters) The answer must address both the overall financial management system and internal controls as well as the adult education program administrator's roles and responsibilities in the process. Applicants that are a consortium or coalition of agencies should describe how the main grantee will provide oversight and work with subgrantees to ensure fiscally sound and compliant use of grant funds.*

3. Describe how the applicant will staff the adult basic education program to meet all of the requirements of the grant.

Help button text: *(Maximum 4000 characters) The answer must include a description of the organizational structure of the adult basic education program. The answer must also provide evidence of sufficient staff, staff time, and resources to meet all of the requirements of the grant, including orientation, assessment, data collection and entry, instruction including*

lesson planning and preparation time, professional development, program improvement, student support services, and collaboration with workforce development partners and other support services in the community. The program must address how it will prevent gaps in service due to staff turnover. If the agency uses local funds/in kind staff time to support some of this work, the answer should include that information. Applicants that are a consortium or coalition of agencies should provide details for all agencies in the consortium/coalition.

4. Describe how the applicant will recruit and hire qualified adult basic education program staff.

Help button text: *(Maximum 1500 characters) The answer must address the minimum qualifications required by the division and by the agency. Applicants that are a consortium or coalition of agencies should provide details for all agencies in the consortium/coalition.*

5. Describe the applicant's onboarding and induction process to ensure that all staff are trained to fulfill all of their roles and responsibilities in the adult education program.

Help button text: *(Maximum 1500 characters) The answer must address staff induction/orientation procedures that ensure that new staff can immediately provide compliant services. Applicants that are a consortium or coalition of agencies should provide details for all agencies in the consortium/coalition.*

6. Describe how the applicant will ensure that adult education program staff have access to and sufficient time to participate in high-quality job-embedded professional development.

Help button text: *(Maximum 1500 characters) The answer must address both required and optional professional development activities and address access to professional development provided through electronic means. Applicants that are a consortium or coalition of agencies should provide details for all agencies in the consortium/coalition.*

7. Describe how the applicant will meet the roles and responsibilities of a partner in the one-stop center, also known as America's Job Center/PA CareerLink, as delegated by the Pennsylvania Department of Education.

Help button text: *(Maximum 2500 characters) The answer must address at a minimum participation in the MOU and corresponding operation of the PA CareerLink one-stop system; contributions to infrastructure costs and other costs; and access to Title II adult basic education activities and career services through the one-stop system. Additional information and examples are strongly encouraged. Applicants that are a consortium or coalition of agencies should provide details for all agencies in the consortium/coalition, as applicable. Refer to Policy G.100 Adult Education and the Workforce Development System.*

Program improvement and data

1. Describe the applicant's data collection, entry, review, and reporting process, policies, and procedures to ensure, per the division's policy, timely and accurate collection and entry of

data into the Division of Adult Education's online data reporting system and submission of required reports.

Help button text: *(Maximum 2000 characters) A complete answer must address all items listed in the question plus include information on the agency's policy and procedures regarding the assessment(s) it will use for reporting purposes. The answer should address the roles and responsibilities of all program staff members associated with data collection, review, entry, and reporting. Applicants that are a consortium or coalition of agencies should provide details for all agencies in the consortium/coalition.*

2. Describe the applicant's plan to ensure that all students are assessed in compliance with Division of Adult Education assessment policy.

Help Button text: *(Maximum 2000 characters) Applicants should refer to Policy D.100 Adult Learner Assessment. The answer should address the standardized assessments the applicant will use and how they were selected, the internal policies and procedures to ensure appropriate training for staff and timely and appropriate administration of assessments, and the use of both in person and remote administration of assessments. Applicants that are a consortium or coalition of agencies should provide details for all agencies in the consortium/coalition.*

3. Describe how the applicant will monitor program performance and ensure continuous program improvement.

Help button text: *(Maximum 2000 characters) Applicants should refer to the Adult Education and Family Literacy Guidelines Section 500 and 501 for information on division requirements related to program improvement. The answer should provide a clear, detailed explanation of how the program director/administrator together with program staff will use data to monitor and evaluate its own performance and student outcomes and of how the program will use the results to support continuous program improvement. Applicants that are a consortium or coalition of agencies should provide details on how they will work together to monitor program performance and ensure continuous program improvement within the consortium/coalition.*

Program overview

1. Describe how the applicant will ensure that it is a full service adult basic education program as required in the Division of Adult Education guidelines.

Help button text: *(Maximum 3000 characters) Refer to Adult Education and Family Literacy Guidelines, Appendix A Sections AA1.1 and AA1.2 for requirements of a full service program. A complete answer will address all of those items. The answer must also connect the proposed activities to the list of allowable activities under WIOA Title II 203(2).*

2. Describe how the applicant will provide a continuum of instructional services covering all six ABE educational functioning levels that supports students to progress through the levels and

prepares students for and supports them to earn a high school equivalency credential, if needed, and transition to and succeed in postsecondary education/training or employment.

Help button text: *(Maximum 2000 characters) The answer must address how the applicant will ensure that it provides services at all ABE educational functioning levels and how it will ensure that, as students' skills improve, they will be able to progress through more advanced levels within the applicant's program and achieve the listed outcomes. Applicants that are a consortium or coalition of agencies should provide details for all agencies in the consortium/coalition.*

3. If the agency serves an area that has a need for ESL services, describe how the agency will meet that need, including how it will support ESL students to transition to ABE services and earn a high school equivalency credential if needed. *(Applicants that are not proposing services in any of the counties in which ESL services are required and that do not plan to offer any ESL should enter Not applicable.)*

Help button text: *(Maximum 2000 characters) Applicants proposing services in one of the counties in which ESL services are required must answer this question and describe how they will provide the full range of ESL services required. Applicants that are not proposing services in any of the counties in which ESL services are required but that plan to provide some ESL services should answer this question. Applicants that are not proposing services in any of the counties in which ESL services are required and that do not plan to offer any ESL should enter Not applicable.*

4. Describe how the applicant will ensure that the services it provides aligns with the workforce and other needs of the communities in which it provides services.

Help button text: *(Maximum 2000 characters) The answer must show evidence that the applicant will provide services that address the needs of the community, including making direct connections to the description of need provided in this grant application.*

Instruction

1. Describe how the applicant will offer a year-round schedule of classes that provides a variety of options for students, including class location, days of the week, time of the day, instructional models, and intensity of classes. Include information about how the agency will ensure access to services for people who are not in the population centers where in person classes are located.

Help button text: *(Maximum 2500 characters) The answer should demonstrate that the applicant has a thorough plan that ensures a flexible schedule with a variety of instructional options to enable eligible participants to attend and complete programs. Do not list actual class schedule here. Applicants that are a consortium or coalition of agencies should provide a description that encompasses all agencies in the consortium/coalition.*

2. Describe instruction in the program.

Help button text: *(Maximum 2500 characters) The answer must describe how the program will use the College and Career Readiness Standards for Adult Education (CCRS) and how the program will supplement real-time instruction with distance learning opportunities provided by the program. The answer must also provide evidence that the research-based instructional and educational practices that support adults in reading, including the essential components of reading instruction; writing; speaking; and mathematics; and English language acquisition, if applicable, are effective and based on best practices derived from the most rigorous research available. Applicants that are a consortium or coalition of agencies should provide a description that encompasses all agencies in the consortium/coalition.*

3. Describe how instruction will support students to develop critical thinking, digital literacy, self-management, and employability skills.

Help button text: *(Maximum 2000 characters) The answer must address how instruction will be contextualized so that students gain the skills needed to transition to and complete postsecondary education and training programs, gain and advance in employment leading to economic self-sufficiency and exercise the rights and responsibilities of citizenship. Applicants that are a consortium or coalition of agencies should provide a description that encompasses all agencies in the consortium/coalition.*

4. Describe the applicant's plans to provide opportunities for intensive, accelerated learning, such as integrated education and training activities, bridge programs, or other intensive specialized classes.

Help button text: *(Maximum 1500 characters) Applicants that are a consortium or coalition of agencies should provide details for the agencies in the consortium/coalition that plan to provide such instruction. If the applicant does not plan offer any opportunities for intensive, accelerated learning, enter Not Applicable.*

5. Describe how instructional staff will determine their students' educational needs and plan instruction to meet those needs, including strategies to support participants with learning differences and participants with disabilities.

Help button text: *(Maximum 2000 characters) The answer must address a variety of methods for determining student needs. The answer must also explain how programs address the needs of individuals with disabilities, including learning disabilities and differences. Applicants that are a consortium or coalition of agencies should provide a description that encompasses all agencies in the consortium/coalition.*

6. Describe how the applicant will ensure that all instructional staff have sufficient time for lesson planning and preparation.

Help button text: *(Maximum 1000 characters) Applicants that are a consortium or coalition of agencies should provide a description that encompasses all agencies in the consortium/coalition.*

Student identification and support

1. Describe how the applicant will identify, recruit, and retain individuals in the proposed service area who need and will benefit from adult basic education services, including individuals with disabilities and other groups identified in the local plan as the most in need.

Help button text: *(Maximum 2500 characters) The answer must address both identification of target populations and recruitment of those individuals. The answer should include information on the partners that the applicant will work with for recruitment. Applicants should refer to the local workforce plan(s) for the local area(s) to be served to find out the groups identified by the local board(s) as being target populations for the workforce system.*

2. Describe the orientation the applicant provides to new students.

Help button text: *(Maximum 1000 characters) The answer should address the requirements of orientation described in the Adult Education and Family Literacy Guidelines Section 301. The answer should also describe how it will help potential students to determine if the program is appropriate for them.*

3. Describe how the applicant will work with students to identify and address barriers to participation in a manner that meets the needs of eligible participants and supports their persistence in the program.

Help button text: *(Maximum 2000 characters) The answer must include information on how the program will coordinate with federal, state, and local support services and not duplicate services. Provide evidence that the applicant sought support services through partnerships before investing grant funds for such services.*

4. Describe the steps the applicant will take to ensure equitable access to, and participation in, this grant-funded program.

Help button text: *(Maximum 500 characters) The answer must address equitable access to and participation in the proposed services. See information on GEPA at <https://www2.ed.gov/fund/grant/apply/appforms/gepa427.pdf>.*

Technology

1. Describe how the applicant will use a range of technology to enhance the availability and quality of its services and improve student outcomes and performance.

Help button text: *(Maximum 2000 characters) The answer should address the use of technology in all aspects of services to students and administrative activities, including the use of technology to improve students' access to services and program efficiency.*

2. Describe the applicant's plan to provide appropriate technology for staff and student use.

Help button text: *(Maximum 1000 characters) The answer must address how the applicant determines the appropriate technology for staff and student use, how the applicant ensures that staff and students have access to and use the technology, and the applicant's plan for procure, maintain, and update technology to ensure continues access to appropriate technology.*

3. Describe how the program will ensure that all staff have the skills necessary to use technology.

Help button text: *(Maximum 1000 characters) The applicants must explain the support it will provide to all staff in the program so that they can use the technology described in #2 to complete the activities described in the answer to #1 and to support students' acquisition and development of digital literacy and digital resiliency.*

Corrections education

Is the applicant planning to provide grant-funded services in a correctional setting?

- Yes. Answer the question below.
- No. Enter NA in the space below.

1. Describe the proposed corrections education program. (Maximum 4000 characters)

Help button text: *(Maximum 4000 characters) The answer must identify the correctional facilities in which the services will be provided; a description of the allowable activities that will be provided; how participants will be selected, including ensuring priority of services to individuals likely to be released within 5 years of participation in the program; the services to be offered; and the contents of the MOU the agency will enter into with the facilities. The answer should also include information on any work the correctional facilities have done to review the recidivism rates of their inmates.*

Alignment with workforce

This content of this section will also be reviewed for consistency with the local workforce plans by the local board of the area(s) selected. Local boards will be given the opportunity to provide recommendations to improve alignment.

Workforce Area 1: Select the local workforce area in which your program will provide services. (Dropdown list of all local workforce areas: Berks Co.; Bucks Co.; Central; Chester Co.; Delaware Co.; Lackawanna Co.; Lancaster Co.; Lehigh Valley; Luzerne-Schuylkill; Montgomery Co.; North Central; Northern Tier; Northwest; Philadelphia Co.; Pocono Cos.; South Central; Southern Alleghenies; Southwest Corner; Three Rivers; Tri County; West Central; Westmoreland/Fayette)

1. Describe how the analysis of local need for adult basic education services in the Description of Need section aligns with and is responsive to the analysis of the following in the local workforce plan for the local area selected: knowledge and skills needed to meet the employment needs of the employers in the area; the workforce in the area, including the educational and skill levels of that workforce; and workforce development activities (including education and training), including the capacity to provide services that addressed the education and skill needs of the workforce.

Help button text: *(Maximum 1500 characters) Refer to Sections 1.1, 1.2, 1.3, and 1.4 of the local workforce plan for this local workforce area. A good answer will draw clear and direct connections between the information in the Description of Need section of this grant and the analysis in the local workforce plan. The answer must include information from the analysis in the local plan. It must address all of the items listed in the question.*

2. Describe how the activities that the applicant proposes to provide with this grant align with and support the strategic vision and goals for preparing an educated and skilled workforce, as described in the local plan.

Help button text: *(Maximum 1500 characters) Refer to Section 2.1 of the local workforce plan for this local workforce area. A good answer will directly link the activities proposed in this grant application to the strategic vision and specific goals in the local plan. The answer should provide specific examples.*

3. Section 4.13 of the local plan identifies the groups of individuals with barriers to employment to which the local board intends to target services. Describe how the proposed activities serve the same target populations and support their success in gaining employment.

Help button text: *(Maximum 1500 characters) A good answer will identify the target populations from the local plan that can benefit from adult basic education services and will explain how the services proposed in this grant application will support those populations. The answer will provide specific examples that directly link proposed activities and services to skills necessary to gain employment.*

4. The local plan identifies key career pathways in the local area. Describe how the adult education activities proposed in this application support and align with those career pathways. How will the program coordinate with other local partners to assist in the development of career pathways and ensure on-ramps for students in adult basic education programs?

Help button text: *(Maximum 1500 characters) Refer to Sections 2.3, 3.3, 4.3, and 4.6 of the local workforce plan for this local workforce area. When addressing coordination with partners, include WIOA core programs as well as other workforce, education, training, and social service partners.*

5. The local plan describes in several sections how the local board plans to work with entities carrying out WIOA core programs, including Title II adult education providers; other

workforce development programs; PA CareerLink® partners; and other education providers to coordinate and align services. Describe how the services described in the grant application align with the proposed activities.

Help button: *(Maximum 1500 characters) Refer to Sections 2.2, 2.3, 3.3, 4.3, 4.10, and 4.12 of the local workforce plan for this local workforce area. The answer should include information on how your program will support and encourage co-enrollment in Title I programs and activities, when appropriate. The answer may include additional activities not mentioned in the local plan but that your program believes it can provide.*

6. Describe any other ways that the applicant's proposed activities align with the local plan.

Help button text: *(Maximum 1500 characters) The answer must not duplicate any information provided in the answers to 1-6. It must draw direct connections between the agency's proposed activities and specific content in the local plan.*

Workforce Area 2 (if applicable): Select the local workforce area in which your program will provide services. (Dropdown list of all local workforce areas: Berks Co.; Bucks Co.; Central; Chester Co.; Delaware Co.; Lackawanna Co.; Lancaster Co.; Lehigh Valley; Luzerne-Schuylkill; Montgomery Co.; North Central; Northern Tier; Northwest; Philadelphia Co.; Pocono Cos.; South Central; Southern Alleghenies; Southwest Corner; Three Rivers; Tri County; West Central; Westmoreland/Fayette)

1. Describe how the analysis of local need for adult basic education services in the Description of Need section aligns with and is responsive to the analysis of the following in the local workforce plan for the local area selected: knowledge and skills needed to meet the employment needs of the employers in the area; the workforce in the area, including the educational and skill levels of that workforce; and workforce development activities (including education and training), including the capacity to provide services that addressed the education and skill needs of the workforce.

Help button text: *(Maximum 1500 characters) Refer to Sections 1.1, 1.2, 1.3, and 1.4 of the local workforce plan for this local workforce area. A good answer will draw clear and direct connections between the information in the Description of Need section of this grant and the analysis in the local workforce plan. The answer must include information from the analysis in the local plan. It must address all of the items listed in the question.*

2. Describe how the activities that the applicant proposes to provide with this grant align with and support the strategic vision and goals for preparing an educated and skilled workforce, as described in the local plan.

Help button text: *(Maximum 1500 characters) Refer to Section 2.1 of the local workforce plan for this local workforce area. A good answer will directly link the activities proposed in this grant application to the strategic vision and specific goals in the local plan. The answer should provide specific examples.*

3. Section 4.13 of the local plan identifies the groups of individuals with barriers to employment to which the local board intends to target services. Describe how the proposed activities serve the same target populations and support their success in gaining employment.

Help button text: *(Maximum 1500 characters) A good answer will identify the target populations from the local plan that can benefit from adult basic education services and will explain how the services proposed in this grant application will support those populations. The answer will provide specific examples that directly link proposed activities and services to skills necessary to gain employment.*

4. The local plan identifies key career pathways in the local area. Describe how the adult education activities proposed in this application support and align with those career pathways. How will the program coordinate with other local partners to assist in the development of career pathways and ensure on-ramps for students in adult basic education programs?

Help button text: *(Maximum 1500 characters) Refer to Sections 2.3, 3.3, 4.3, and 4.6 of the local workforce plan for this local workforce area. When addressing coordination with partners, include WIOA core programs as well as other workforce, education, training, and social service partners.*

5. The local plan describes in several sections how the local board plans to work with entities carrying out WIOA core programs, including Title II adult education providers; other workforce development programs; PA CareerLink® partners; and other education providers to coordinate and align services. Describe how the services described in the grant application align with the proposed activities.

Help button: *(Maximum 1500 characters) Refer to Sections 2.2, 2.3, 3.3, 4.3, 4.10, and 4.12 of the local workforce plan for this local workforce area. The answer should include information on how your program will support and encourage co-enrollment in Title I programs and activities, when appropriate. The answer may include additional activities not mentioned in the local plan but that your program believes it can provide.*

6. Describe any other ways that the applicant's proposed activities align with the local plan.

Help button text: *(Maximum 1500 characters) The answer must not duplicate any information provided in the answers to 1-6. It must draw direct connections between the agency's proposed activities and specific content in the local plan.*

Workforce Area 3 (if applicable): Select the local workforce area in which your program will provide services. (Dropdown list of all local workforce areas: Berks Co.; Bucks Co.; Central; Chester Co.; Delaware Co.; Lackawanna Co.; Lancaster Co.; Lehigh Valley; Luzerne-Schuylkill; Montgomery Co.; North Central; Northern Tier; Northwest; Philadelphia Co.; Pocono Co.; South Central; Southern Alleghenies; Southwest Corner; Three Rivers; Tri County; West Central; Westmoreland/Fayette)

1. Describe how the analysis of local need for adult basic education services in the Description of Need section aligns with and is responsive to the analysis of the following in the local workforce plan for the local area selected: knowledge and skills needed to meet the employment needs of the employers in the area; the workforce in the area, including the educational and skill levels of that workforce; and workforce development activities (including education and training), including the capacity to provide services that addressed the education and skill needs of the workforce.

Help button text: *(Maximum 1500 characters) Refer to Sections 1.1, 1.2, 1.3, and 1.4 of the local workforce plan for this local workforce area. A good answer will draw clear and direct connections between the information in the Description of Need section of this grant and the analysis in the local workforce plan. The answer must include information from the analysis in the local plan. It must address all of the items listed in the question.*

2. Describe how the activities that the applicant proposes to provide with this grant align with and support the strategic vision and goals for preparing an educated and skilled workforce, as described in the local plan.

Help button text: *(Maximum 1500 characters) Refer to Section 2.1 of the local workforce plan for this local workforce area. A good answer will directly link the activities proposed in this grant application to the strategic vision and specific goals in the local plan. The answer should provide specific examples.*

3. Section 4.13 of the local plan identifies the groups of individuals with barriers to employment to which the local board intends to target services. Describe how the proposed activities serve the same target populations and support their success in gaining employment.

Help button text: *(Maximum 1500 characters) A good answer will identify the target populations from the local plan that can benefit from adult basic education services and will explain how the services proposed in this grant application will support those populations. The answer will provide specific examples that directly link proposed activities and services to skills necessary to gain employment.*

4. The local plan identifies key career pathways in the local area. Describe how the adult education activities proposed in this application support and align with those career pathways. How will the program coordinate with other local partners to assist in the development of career pathways and ensure on-ramps for students in adult basic education programs?

Help button text: *(Maximum 1500 characters) Refer to Sections 2.3, 3.3, 4.3, and 4.6 of the local workforce plan for this local workforce area. When addressing coordination with partners, include WIOA core programs as well as other workforce, education, training, and social service partners.*

5. The local plan describes in several sections how the local board plans to work with entities carrying out WIOA core programs, including Title II adult education providers; other

workforce development programs; PA CareerLink® partners; and other education providers to coordinate and align services. Describe how the services described in the grant application align with the proposed activities.

Help button: *(Maximum 1500 characters) Refer to Sections 2.2, 2.3, 3.3, 4.3, 4.10, and 4.12 of the local workforce plan for this local workforce area. The answer should include information on how your program will support and encourage co-enrollment in Title I programs and activities, when appropriate. The answer may include additional activities not mentioned in the local plan but that your program believes it can provide.*

6. Describe any other ways that the applicant's proposed activities align with the local plan.

Help button text: *(Maximum 1500 characters) The answer must not duplicate any information provided in the answers to 1-6. It must draw direct connections between the agency's proposed activities and specific content in the local plan.*

Past effectiveness

1. Provide evidence that the applicant has provided services to the individuals most in need in the proposed service area.

Help box text: *(Maximum 1500 characters) The answer must provide evidence that the applicant has experience providing services similar to those proposed in this grant application to individuals who are eligible participants under WIOA and State Act 143.*

2. Describe the applicant's success in the immediately preceding three program years in supporting student persistence in the program.

Help box text: *(Maximum 1500 characters) Answer should include narrative with data to support the narrative. It should address the applicant's success in having individuals who complete its intake process achieve participant status (i.e., reach 12 hours of service) and its success in having participants remain in the program long enough to achieve their goals.*

3. Describe the applicant's effectiveness in the immediately preceding three program years in improving the literacy of eligible individuals and meeting the state levels of performance especially with regard to eligible individuals with low levels of literacy. Address past effectiveness in achieving the following outcomes with learners: improving reading, writing, and mathematics skills; improving English language proficiency; transitioning from ESL to ABE; attaining a high school equivalency credential; transitioning to employment; transitioning to postsecondary education or training; and earning a postsecondary credential through participation in an integrated education and training activity or while co-enrolled in an adult basic education program.

Help box text: *(Maximum 3000 characters) The answer should include information that clearly establishes past effectiveness with eligible individuals for the listed outcomes. Information may be qualitative and quantitative. The information provided should include the*

total numbers as well as percentages to make clear the full extent of the past effectiveness. In the case of a consortium or coalition of agencies, the answer must address the past effectiveness of each agency separately.

Budget Narrative

Describe how the funds requested will support the purpose of the Adult Basic Education Direct Service grant and attainment of program outcomes. The description should provide clear evidence that the proposed expenditures are reasonable and necessary to meet the requirements of the program. *(Maximum 2500 characters)*

Agency information

Staff

List the staff of the adult basic education program including subgrantees if applicable, by position title, role(s), employment status, and percentage of total time on the 064 grant. Include volunteer classroom aides and tutors, if applicable. Provide evidence that staff members are highly qualified by listing the minimum qualifications for each position.

Help button text: *The information provided here should align with the information in the salary sections of the budgets. However, if multiple individuals have the same position with the same roles, status, percentage of time on 064 grant, and minimum qualifications, only list the position once.*

- *Position title: Title on the agency's position description.*
- *Role(s): The entry for a position should include **all roles** that the person in the position fulfills for the adult education program. In most programs, most positions fulfill multiple roles. All of those roles should be listed in the second column. Do not list each role in a separate entry. Grantees must address all of the required roles listed in the Adult Education and Family Literacy Program Guidelines.*
- *Status at Agency: Select the status that reflects the status of the position at the agency not for the adult education program specifically. It is possible for a person to be full time at the agency but work only part time on adult education activities. Select the status at the agency.*
- *% of total time on 064 grant: The percentage of each position's overall time spent working on activities for the 064 adult basic education activities. For example, the program administrator may be a full-time employee at ABC Literacy Center but only spends 10% of their time working on the 064 activities. On the other hand, a part-time teacher working 8 hours per week may spend 100 percent of their time on 064 activities.*

- *Minimum qualifications: Include only what the agency requires to hire a person for that position. Do not list the qualifications of the person currently holding the position. For example, if the agency requires clerical staff to have at least a high school diploma or equivalent, that is the information to include, even if the person currently doing clerical work has a bachelor’s degree. Do not describe the duties of the position.*

Position Title (single line text box)	Role(s) covered by the position (multi line textbox)	Status at agency (dropdown list: full-time, part-time, volunteer)	% of total time on 064 grant activities (numerical box 3 digit max)	Minimum qualifications required for this position (multi line textbox) max character 175
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Complete this table

Help button text: *The numbers in this table include all paid staff members who work on Adult Basic Education Direct Service 064 grant activities including staff of subgrantees regardless of the percentage of their overall time spent on 064. Instructional and student support staff who are full-time employees of the agency and work activities under both 064 and other funding sources should be included in this table.*

Total number of paid staff members working on 064 activities	
Number of full-time instructional and student support staff with benefits working on 064 activities	
Number of part-time instructional and student support staff working on 064 activities	

Program sites and class schedule

Class locations

Enter the name, street address, room number if applicable, city, and county of each site at which classes with some in-person instruction are located. For fully remote classes with no in-person option, enter Fully Remote in the Class Site column and Remote in the address column. Select the appropriate county. Click the “Add” button after each entry to continue to add locations. Once all locations have been entered, click “Save” before starting the Class Schedule section to populate the drop down menu for the first column in that section.

Help box text:

1. *Enter the name of the building in the Class Site column and the street address, room number (if applicable), and city in the Address column. Select the appropriate county from the dropdown.*
2. *For Fully remote classes, enter Fully Remote in Class Site column and Remote in address. Select an appropriate county.*

3. Click on the "Add" button after saving each entry to continue to add locations. Continue this sequence until all locations have been entered. Click "Save " when complete to create the dropdown menu for the first column in the class schedule.

Class Site	Address	County

Class schedule Before completing the Class Schedule, click the "Save " button at the bottom of the screen to populate the Class Site drop down menu.

Help button text:

Each class must be entered separately. Managed enrollment classes should be entered separately with the appropriate start and end dates.

Class location: The content of the dropdown is populated from the information entered in the Class Sites section.

Delivery Method:

- *Blended classes combine live real-time class sessions (remote or in-person) with online, asynchronous coursework. Students are required to attend real-time class sessions, typically once a week, and complete the remainder of their coursework online. In this delivery method, all students must complete the online asynchronous coursework, which is fully aligned with the classroom content and activities.*
- *Hyflex classes are real-time classes in which some students attend in person and some students attend remotely during the same class session. Students can attend either the in-person or remote session and have a similar learning experience.*
- *Hybrid classes are those that have regularly scheduled in person class sessions combined with regularly scheduled real-time remote class.*
- *Fully remote are classes that have no in-person option.*
- *Fully in-person are classes that have no remote option.*

Type of class: Institutional refers to classes held in a correctional facility or other residential facility and provided only to adults who are inmates, patients, or residents of that facilities. Refer to the Adult Education and Family Literacy Guidelines for definitions of managed enrollment classes and open entry classes.

Do not enter supplemental computer-based distance learning activities in the Class Schedule.

Class Site	Delivery Method	Class Level	Type of Class	Start date	End date	# Hours per Week	Total Hours	Class Days and Times
	Fully in person	ABE Levels 1-4	Community/Managed					
	Hyflex	HSE preparation	Community/Open Entry					
	Hybrid	ABE 5-6/Transition	Institutional/Managed					
	Fully remote	Multilevel ABE 1-6	Institutional/Open Entry					

	Blended	ESL						
		IET						
		ABE for ELLs						

Supplemental class schedule (if offered)

Help button text:

Supplemental classes in specific content areas provide additional instruction to students who are attending regular managed enrollment or open entry/open exit classes who want more intensive instruction in specific content. Supplemental classes cannot be offered in lieu of regular classes. Do not enter supplemental distance learning activities in the Supplemental Class Schedule.

Class Site	Delivery Method	Subject matter	Type of class	Start Date	End Date	# Hours per week	Total hours	Class days and times
	Fully in person Hyflex Hybrid Fully remote Blended		Community/Managed Community/Open Entry Institutional/Managed Institutional/Open Entry					

Agency activity summary

1. Enter a number or dollar amount in each open cell.

Help button text:

Review Section 604.2 Limitations in the Adult Education and Family Literacy Guidelines regarding ceilings on federal and state funds used for institutional instruction and the ceiling on state funds used for instruction to prepare students at the adult secondary level to take the high school equivalency tests.

The table will automatically calculate the amounts in the Totals row and in the cost per student row. The numbers in the Total Planned Enrollment column must align with the activities the agency proposes to provide. The number of students in the ESL column is a subset of the number in the ABE rows in the Total Planned Enrollment column. Requested amounts should reflect the amounts the agency proposes to use to provide the related services. The requested amounts must adhere to the floors and ceilings explained in the Adult Education and Family Literacy Guidelines.

Activity	Total Planned Enrollment	# ESL Students (subset)	# of Volunteer Classroom Aides	Requested Amount Federal Funds	Requested Amount State Funds
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ABE Institutional					
ASE/GED Institutional					
ABE Community Based					
ASE/GED Community Based					
Totals					
Requested Amount					
Cost Per Student					

- Provide a detailed explanation for the numbers entered in the Agency Activity Summary table.

Help Button Text: (Maximum 1500 characters) The answer must describe how the applicant determined the overall contracted enrollment, compare the proposed number to actual enrollment in the previous three program years, and explain any significant differences. In addition, the applicant must explain the distribution of proposed enrollment across the four activities as well as in the ESL subgroup and volunteer classroom aides column. Explain the proposed dollar amounts requested for each of the activities.

Subgrantee Activity Summary

If applicable, enter all subgrantees that are going to provide instructional services under this grant. If the subgrantee will enter its own data in eData, you must enter the AUN..

Subgrantee Name	AUN	Total Planned Enrollment	Amount Federal Funds	Amount State Funds

Counties Served

List each county in which the agency will provide services and the anticipated amount of funds to be expended.

County Served	Federal Dollar Amount	State Dollar Amount

Program Contact Information

Enter all information for the program contact. Select the type of agency from dropdown list.

Help Button: *The program contact is the person responsible for day-to-day oversight of the adult basic education program. This person will be on the Division of Adult Education's program contact list and will receive email notifications from the division. It should not be a grants administrator or other high-level management.*

Title

Name: (First, Middle, Last)

Address: (street)

(city)

(state)

Zip Code:

Telephone:

Email Address:

Type of Agency: Community-based organization; Community, Technical or Junior College, Correctional Institution, Faith Based Organization, Four Year College or University, Library, Local Education Agency, Other Agency, Other Institution (Non-Correctional), Other Institution of Higher Education

This individual is a full-time employee at the agency. Yes, No

Assurances

Select Yes or No for each of the statements. If not planning to provide corrections education, select N/A for those statements.

All applicants

- The applicant will expend funds awarded under this grant only in a manner consistent with the supplement not supplant provision in section 241(a).
- The applicant will abide by federal and state regulations that govern these grant funds.
- The applicant has read and reviewed the most current versions of Division of Adult Education policies and guidelines and will abide by them.

Corrections education providers

- Corrections education: The applicant will give priority to serving individuals who are likely to leave the correctional institution within five years of participation in the program.
- Corrections Education: The applicant assures that it will enter into an MOU with the correctional facilities, which ensures that all instruction is compliant with DAE guidelines and requirements. The applicant assures that it will collect SID numbers for individuals in corrections education programs and will work with the DAE to meet the recidivism reporting requirements of section 225.

Budgets

Federal subproject budget

Salary

Function	Object	Role/Activity	Name	Degree	# Hours	\$/hour	Amount
1691	101	Assessment					
2122	102	Childcare/babysitting					
2160	103	Clerical					
2300	104	Data entry					
2600	105	Data review/quality					
2900	110	Digital literacy specialist					
	116	Employee buy out					
	190	Fiscal administration					
		General grant administration					
		Human resources					
		Instruction					
		Intake/orientation					
		Other					
		Paid classroom aide					
		Preparation					
		Professional development					
		Program coordination					
		Program director					
		Student recruitment					
		Student support					

Salary Help Button: Refer to the *Adult Education and Family Literacy Guidelines* Section 606, 607, and 608 for definitions of the function and object codes. Enter information for this part of the application one name at a time. Select a cost function and object code from the dropdown menus; use the appropriate object code for the employee's position. Select a role to specify the work being done. For example, OC 105 Administrative Support Personnel can be "Clerical" in some function codes and "Data entry" in FC 2900. Type in the name; choose the degree from the dropdown menu; enter the number of hours; and enter the hourly rate for each staff member. The amount paid will be automatically calculated. Click on the "add" button to add that person to the list. Repeat this sequence until all staff has been entered.

Note: Individual staff members may be entered on the list more than one time if they fulfill multiple roles.

Note: The total hours entered for each staff member (all grants combined) cannot exceed 2080 hours unless previously approved by the Division.

The applicant may provide narrative information to clarify the expenses if desired. (Text box – 750 characters maximum)

Benefits

Function	Object	Description	Amount
1691	210		
2122	220		
2160	230		
2300	231		
2600	250		
2900	260		

Benefits Help Button: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. All benefits charged to the grant must be prorated across function codes in the same proportions as the associated staff salaries. Select a cost function and object code from the dropdown menus; add a description of the benefit and the total amount. Click on the "add" button after each entry. Repeat this sequence until all benefits have been entered.

Note: Total FICA costs must not exceed Federal rate totals.

The applicant may provide narrative information to clarify the expenses if desired. (Text box – 750 characters maximum)

Contracted Services

Function	Object	Name	Description	Amount
1691	320			
2122	330			
2160	340			
2300	350			
2600	360			
2900	390			

Contracted Services Help Button text: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Enter information for contracted professional and technical services. Select a cost function and object code from the dropdown menus. OC 330 may only be allocated to FC 2300. OC 350 may only be allocated to FC 2600. PA CareerLink infrastructure costs must be allocated to FC 2300/OC 390. PA CareerLink shared personnel costs must be allocated FC 2300/OC 330. Enter the name of the contractor. The information in the Name column must be the name of the entity or person with whom the program is contracting. General descriptions are not acceptable. Enter a description of the services contracted for and enter the amount. Click on the "add" button after each entry. Repeat this sequence until all contracted services have been entered.

The applicant may provide narrative information to clarify the expenses if desired. (Text box – 750 characters maximum)

Building-related

Function	Object	Description	Amount
2300	410		
2600	420		
	430		
	441		
	490		
	520		

Building-related Help Button: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Enter information for building-related expenses. Select a cost function and object code from the dropdown menus; enter a description of the item; and enter the amount. Click on the "add" button after each entry. Repeat this sequence until all building-related expenses have been entered. All entries for rent should include the locations of the sites for which rent is being paid.

The applicant may provide narrative information to clarify the expenses if desired. (Text box – 750 characters maximum)

Leased Equipment

Function	Object	Description	Amount
1691	442		
2122	448		
2160	449		
2300			
2900			

Leased Equipment Help Button: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Enter information for leased equipment. Select a cost function and object code from the dropdown menus; enter a description of the item; and enter the amount. Click on the "add" button after each entry. Repeat this sequence until all leased equipment items have been entered.

The applicant may provide narrative information to clarify the expenses if desired. (Text box – 750 characters maximum)

Purchased Equipment

Function	Object	Description	Unit Cost	No of units	Amount	Location
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1691	790				calculation	
2122						
2160						
2300						
2900						

Purchased Equipment Help Button: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Enter information for purchased equipment. Select a cost function and object code from the dropdown menus. Then, enter a description of the item, the cost per unit, the number of units, and the location where the equipment will be housed/used. You do not need to enter an amount: this field will update automatically. Click on the "add" button after each entry. Repeat this sequence until all purchased equipment has been entered.

The applicants must provide an explanation/justification for any equipment to be purchased. (Text box – 750 characters maximum)

Program-related

Function	Object	Description	Amount
1691	530		
2122	540		
2160	550		
2300	580		
2600	610		
2900	640		
	650		
	810		

Program-related Help Button: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Enter information for other program-related expenses. Select a cost function and object code from the dropdown menus; enter a description of the expense. The description must clearly and specifically describe the purpose of the expenditure. Do not simply restate the object code title and enter the amount. Click on the "add" button after each entry. Repeat this sequence until all program-related expenses have been entered.

The applicant may provide narrative information to clarify the expenses if desired. (Text box (multi-line – 750 characters maximum))

Local Match

Function	Object	Description	Local Match In-Kind	Local Match Cash	Amount
LM	101				

	102				
	103				
	105				
	106				
	110				
	190				
	210				
	220				
	230				
	231				
	250				
	260				
	320				
	324				
	330				
	340				
	350				
	390				
	410				
	420				
	430				
	441				
	442				
	448				
	449				
	490				
	520				
	530				
	540				
	550				
	580				
	610				
	640				
	650				
	790				
	810				
	891				

Local Match Help button text: *Select the LM function code; select an object code from the dropdown menu; enter a description of the item; enter the local match in-kind and/or local match cash that corresponds with the object code you selected. The amount column will automatically calculate, no need to enter an amount in that column. Click on the "add" button after each entry. Repeat this sequence until all Local Match is entered.*

Restricted Indirect Costs

Function	Object	Amount
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5000	900	
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Restricted Indirect Costs Help Button text: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Exclude the total in the Purchased Equipment section when calculating the restricted indirect costs.

State subproject budget

Salary

Function	Object	Role/Activity	Name	Degree	# Hours	\$/hour	Amount
1691	101	Assessment					
1692	102	Childcare/babysitting					
2122	103	Clerical					
2160	104	Data entry					
2200	105	Data review/quality					
2300	110	Digital literacy specialist					
2600	116	Employee buy out					
2900	190	Fiscal administration					
		General grant administration					
		Human resources					
		Instruction					
		Intake/orientation					
		Other					
		Paid classroom aide					
		IHPDS					
		Program coordination					
		Program director					
		Student recruitment					
		Student support					
		Tutor training/coordination					
		Professional development					
		Preparation					

Salary Help Button: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Enter information for this part of the application one name at a time. Select a cost function and object code from the dropdown menus; use the appropriate object code for the employee's position. Select a role to specify the work being done. For example, OC 105 Administrative Support Personnel can be "Clerical" in some function codes and "Data entry" in FC 2900. Type in the name; choose the degree from the dropdown menu; enter the number of hours; and enter the hourly rate for each staff member. The amount paid will be automatically calculated. Click on the "add" button to add that person to the list. Repeat this sequence until all staff has been entered.

Note: Individual staff members may be entered on the list more than one time if they fulfill multiple roles.

Note: The total hours entered for each staff member (all grants combined) cannot exceed 2080 hours unless previously approved by the Division.

Benefits

Function	Object	Description	Amount
1691	210		
1692	220		
2122	230		
2160	231		
2200	250		
2300	260		
2600			
2900			

Benefits Help Button: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. All benefits charged to the grant must be prorated across function codes in the same proportions as the associated staff salaries. Select a cost function and object code from the dropdown menus; add a description of the benefit and the total amount. Click on the "add" button after each entry. Repeat this sequence until all benefits have been entered.

Note: Total FICA costs must not exceed Federal rate totals.

The applicant may provide narrative information to clarify the expenses if desired. (Text box – 750 characters maximum)

Contracted Services

Function	Object	Name	Description	Amount
1691	320			
1692	330			
2122	340			
2160	350			
2200	360			
2300	390			
2600				
2900				

Contracted Services Help Button text: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Enter information for contracted professional and technical services. Select a cost function and object

code from the dropdown menus. OC 330 may only be allocated to FC 2300. OC 350 may only be allocated to FC 2600. Enter the name of the contractor. The information in the Name column must be the name of the entity or person with whom the program is contracting. General descriptions are not acceptable. Enter a description of the services contracted for and enter the amount. Click on the "add" button after each entry. Repeat this sequence until all contracted services have been entered. The only PA CareerLink® infrastructure costs that may be charged to the State Adult Education 064 budget is rent for classroom space. If used it should be allocated to FC 2600/OC 390.

The applicant may provide narrative information to clarify the expenses if desired. (Text box – 750 characters maximum)

Building-related

Function	Object	Description	Amount
2300	410		
2600	420		
	430		
	441		
	490		
	520		

Building-related Help Button: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Enter information for building-related expenses. Select a cost function and object code from the dropdown menus; enter a description of the item; and enter the amount. Click on the "add" button after each entry. Repeat this sequence until all building-related expenses have been entered. All entries for rent should include the locations of the sites for which rent is being paid.

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2200			
2300			
2900			

Leased Equipment Help Button: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Enter information for

leased equipment. Select a cost function and object code from the dropdown menus; enter a description of the item; and enter the amount. Click on the "add" button after each entry. Repeat this sequence until all leased equipment items have been entered.

The applicant may provide narrative information to clarify the expenses if desired. (Text box – 750 characters maximum)

Purchased Equipment

Function	Object	Description	Unit Cost	No of units	Amount	Location
1691	790				calculation	
1692						
2122						
2160						
2200						
2300						
2900						

Purchased Equipment Help Button: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Enter information for purchased equipment. Select a cost function and object code from the dropdown menus. Then, enter a description of the item, the cost per unit, the number of units, and the location where the equipment will be housed/used. You do not need to enter an amount; this field will update automatically. Click on the "add" button after each entry. Repeat this sequence until all purchased equipment has been entered.

The applicants must provide an explanation/justification for any equipment to be purchased. (Text box – 750 characters maximum)

Program-related

Function	Object	Description	Amount
1691	530		
1692	540		
2122	550		
2160	580		
2200	610		
2300	640		
2600	650		
2900	810		

Program-related Help Button: Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Enter information for other program-related expenses. Select a cost function and object code from the dropdown menus; enter a description of the expense. The description must clearly and specifically describe the purpose of the expenditure. Do not simply restate the object code title and enter

the amount. Click on the "add" button after each entry. Repeat this sequence until all program-related expenses have been entered.

The applicant may provide narrative information to clarify the expenses if desired. (Text box – 750 characters maximum)

Restricted Indirect Costs

Function	Object	Amount
5000	900	

Restricted Indirect Costs Help Button text: *Refer to the Adult Education and Family Literacy Guidelines Section 606, 607, and 608 for definitions of the function and object codes. Exclude the total in the Purchased Equipment section when calculating the restricted indirect costs.*