## **Attachment IV to UIPL No. 16-20**

## **Supplemental Budget Request (SBR) Application**

<u>Instructions</u>: States must complete the application using the suggested format and instructions below for the projects/activities for which the state is seeking funding. This application is to be combined with a completed SF-424 and an SF-424A covering all projects/activities.

Unemployment Insurance Supplemental Budget Request Abstract						
State Name:						
Total Funds Requested for All Projects:						
Name, Title, and Address of Grant Notification Contact (Typically the State Workforce Agency Administrator) Name: Title: Address:						
Name, E-Mail Address, and Phone Number of SBR Project or Fiscal Manager Name: E-Mail Address: Telephone Number:						
Provide the following information for each project (add additional rows as needed):						
Project Name	<b>Total Cost of Project</b>	<b>Proposed Completion Date</b>				

Project Description							
Project Timeline							
Description of Costs							
State Agency Staff Costs:							
Type of Position	Total 1	Hours	Cost Per Hour		Total		
Contract Staff Costs:							
Type of Position	Total 1	Hours	ours Cost Per Hour		Total		
Hardware, Software and Telecommunications Equipment:							
Item Description	Cost P	er Item	Quantity		Total		
Other Costs:							
Item		Cost	Explan		nation		

## SECTION INSTRUCTIONS

**Name of Project:** Provide the name of the proposed project.

**Amount of Funding Request for this Project:** Provide the total amount of funds requested in this individual project.

<u>State Contact</u>: Provide name, telephone number, and e-mail address of the individual who can answer any questions relating to the proposal.

**Project Description:** Provide a brief description of the projects/activities for which the state seeking funding.

**Project Timeline:** Provide a list of the dates and the milestones for this project.

**Description of Costs:** Provide an explanation of all costs included in the project.

- **State Agency Staff Costs:** Use the table format provided in this attachment to request state staff to support project implementation.
- **Contract Staff Costs:** Use the table format provided in this attachment to request contract staff to support project implementation.
- Hardware, Software, and Telecommunications Equipment: Provide an itemized list of hardware, software, and telecommunications equipment including the cost per item and the number of each item requested. A description of each item must provide any information needed to identify the specific item and a description of the size and capacity of each item if applicable.
- Other: Identify each item of cost not covered elsewhere and provide the expected cost per item. The need for each item must be explained.