FY 2018 CYEP NOFO Application

Appendix G

Project Worksheet Summary

Agency Name:			
Address:	City:	County:	Zip:
Phone:	Fax:	Email:	
Projected Number of CYEP Youth enrolled: In-School Youth: Out-of-School-Youth: Total: 0			

Employer Name	# Part-Time Jobs	PT Hours per week	# Full-Time Jobs	FT Hours per week	# of Jobs that will be Unsubsidized	# of Jobs that will be Subsidized	Average # of Months Jobs will be Subsidized w/Grant	Wage Rate
TOTALS	0		0		0	0		