

FY 2016

**UTILIZATION REPORT  
FOR  
MISCELLANEOUS FEDERAL GRANT PROGRAM APPROPRIATION  
AND PERSONNEL AUTHORIZATION REQUEST  
A.C.A. §19-7-501 ET SEQ.**

Date: 04/30/2015 Grant ID H418P130007 Legislative Review Date: \_\_\_\_\_

Agency: Arkansas Rehabilitation Services Program Title: Arkansas PROMISE 2013

Granting Organization: U.S. Department of Education Grant #: H418P130007

Effective Date of Authorization: Beginning: 07/01/2015 Ending: 06/30/2016

Purpose of Grant / Reason for addition or change: (include attachments as necessary to provide thorough information):  
 Arkansas Promise (Promoting the Readiness of Minors in Supplemental Security Income) Grant - This request continues a previously approved increase to Regular Salary, Personal Services Match, and associated travel related expenses as a result of additional funding from the grantee for FY 2016.

**Project-Grant Funding**

Business Area Code: 0520  
 Funds Center Code: M89  
 Fund Code: FER0500  
 Functional Area Code: EDUC

Continuation of Existing Program:   
 Change in Existing Program:   
 New Program:

|  | New Federal Funds | State Matching Funds | Other Matching Funds | Project Total |
|--|-------------------|----------------------|----------------------|---------------|
| Regular Salaries                               | 36,455            |                      |                      | 36,455        |
| Extra Help                                     |                   |                      |                      |               |
| Operating Expenses                             | 13,000            |                      |                      | 13,000        |
| Personal Services Matching                     | 13,545            |                      |                      | 13,545        |
| Conference & Travel Expense                    |                   |                      |                      |               |
| Professional Fees                              |                   |                      |                      |               |
| Capital Outlay                                 |                   |                      |                      |               |
| Data Processing                                |                   |                      |                      |               |
| American Recovery and Reinvestment Act of 2009 |                   |                      |                      |               |
| Others:  |                   |                      |                      |               |
| <b>Total</b>                                   | \$ 63,000         | \$                   | \$                   | \$ 63,000     |

Add

Remove

**Funding Percentages**

**Type of Federal Grant**

|       | Federal | State | Other | Total |
|-------|---------|-------|-------|-------|
| FY 13 | %       | %     | %     | %     |
| FY 14 | %       | %     | %     | %     |
| FY 15 | %       | %     | %     | %     |
| FY 16 | 100 %   | %     | %     | 100 % |
| FY 17 | %       | %     | %     | %     |

WIA   
 Non-WIA   
 ARRA

Anticipated Duration of Federal Funds 10/01/2014 - 09/30/2016

**DFA IGS State Technology Planning** Date \_\_\_\_\_  
 Items requested for information technology must be in compliance with Technology Plans as submitted to DFA IGS State Technology Planning.

**Positions to be established: (list each position separately)**

\* Gr 66 & 99 only

| Personnel Area | Position Number | Cost Center | Commitment Item | Position Title         | Class Code | Grade | Line Item Maximum* |
|----------------|-----------------|-------------|-----------------|------------------------|------------|-------|--------------------|
| WE08           | 22161624        | 359419      | 501:00:00       | Certified VR Counselor | L098C      | C119  |                    |

Add

Remove

State funds will not be used to replace federal funds when such funds expire, unless appropriated by the General Assembly and authorized by the Governor.

Approved by: \_\_\_\_\_  
 Agency Director Date 5/12/15

\_\_\_\_\_ 5/29/15 \_\_\_\_\_ 5/12/15  
 Office of Budget Date Office of Personnel Mgmt Date

*Handwritten initials and date: JCS 5/29/15*

*Handwritten initials and date: JCS 05/29/2015*