

Enter the county's unique ID number

## Contact Information

COUNTY/CONSORTIUM NAME

PLAN YEAR

CONTACT PERSON

TITLE

ADDRESS

CITY

STATE

ZIP CODE

PHONE NUMBER

EMAIL ADDRESS (where correspondence related to this form will be sent)

CONFIRM EMAIL ADDRESS

**Note: Please review the 2020-2021 MFIP Biennial Service Agreement Bulletin for more details before you complete this document.**

## A. Needs Statement

### 1. Besides funding, what is the single biggest challenge you are facing in financial assistance services?

Some of the families have multiple barriers which make it hard to concentrate on the MFIP requirements. Being a small rural county located next to larger metro counties, additional resources to help address additional financial needs are very limited. A major challenge is finding resources or agencies with funds to help us fill any gaps that we have when trying to assist families who are already using financial assistance. We also continue to struggle with transportation issues and availability of child care.

9482 characters remaining

### 2. Besides funding, what is the single biggest challenge you are facing in employment services?

We see families with multiple barriers whether it be education (HS or GED) to qualify for jobs, transportation needs to get to and from work, child care availability, and/or health and mental health issues.

9791 characters remaining

### 3. Identify the strengths in your community that you are most proud of that benefit MFIP/DWP families.

There are some employers who understand that we struggle with basic needs like reliable transportation and quality child care in order for our clients to consistently get to work on time or show up at all. Some employers give these clients a second chance at employment, rehire, or hold positions. Additional support services like Minnesota Valley Action Council, Salvation Army, and the local Rotary Club do put tremendous effort in helping out these families as they know there are not many options in the rural setting.

9477 characters remaining

**A. Needs Statement (continued)**

**3. What strengths and resources do you have available to address the needs of your participants?**

Please **check all** the resources available to participants in your service area and check whether the resource is available within MFIP financial or employment services "in-house" or from a partner organization (county resources with developed connections to MFIP), and/or an external community resource or both. If you lack sufficient resources in your area, check the Resource Gaps column, even if there are some resource sources. Add any "other" resources that you consider necessary.

MFIP Resources	Partner Resources	Community Resources	Resource Gaps	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ABE/GED
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adult/elder services
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Career planning
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Childcare funds
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Chemical health services
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Computer lab access
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Credit counseling/financial literacy
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	English Language Learner (ELL)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food shelf
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Housing assistance
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job club
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job development
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Job placement
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Job retention
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Job search workshops
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Mental health services
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	On-the-job training program
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Post-secondary education planning
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Short-term training
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Supported work / paid work experience
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Transportation assistance (gas cards, bus cards)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Vehicle repair funds
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Volunteer opportunities
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Youth program
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other

**4. County Program Contact Information**

Please name contacts for the following programs if different from the contact on the cover page. You only need to give a person's phone and email once.

<b>MFIP EMPLOYMENT SERVICES</b> STAFF CONTACT NAME	PHONE NUMBER	EMAIL ADDRESS
John Stepien	507-237-4000	JohnS@co.sibley.mn.us
<b>DWP</b> STAFF CONTACT NAME	PHONE NUMBER	EMAIL ADDRESS
John Stepien	507-237-4000	JohnS@co.sibley.mn.us
<b>FINANCIAL ASSISTANCE SERVICES</b> STAFF CONTACT NAME	PHONE NUMBER	EMAIL ADDRESS
John Stepien	507-237-4000	JohnS@co.sibley.mn.us

**A. Needs Statement** (continued)

**Employment Services Provider(s) Information**

Statute [256J.50, subdivision 8](#): Each county, or group of counties working cooperatively, shall make available to participants the choice of at least two employment and training service providers as defined under Minnesota Statutes, section [256J.49, subdivision 4](#), except in counties contracting with CareerForce Centers that use multiple employment and training services or that offer multiple services options under a collaborative effort and can document that participants have choice among employment and training services designed to meet specialized needs.

List your current employment services provider(s) and check the respective box to indicate which population served. If a CareerForce Center is the only employment services provider, list the multiple employment and training services among which participants can choose. Section G of this form addresses provider choice.

<b>NAME</b>		<b>ADDRESS</b>	
<input type="text" value="Minnesota Valley Action Council"/>		<input type="text" value="110 6th Street, PO BOX 87, Gaylord, MN 55334"/>	
<b>CONTACT PERSON</b>	<b>PHONE NUMBER</b>	<b>EMAIL</b>	
<input type="text" value="Lynn Tollefson"/>	<input type="text" value="507-237-2981"/>	<input type="text" value="ltollefson@mnvac.org"/>	
<b>Population Served</b>	<input checked="" type="checkbox"/> MFIP ES	<input checked="" type="checkbox"/> DWP ES	<input checked="" type="checkbox"/> FSS
		<input checked="" type="checkbox"/> Teen Parents	<input checked="" type="checkbox"/> 200% FPG

## B. Service Models

### Minnesota Family Investment Program (MFIP) and the Diversionary Work Program (DWP)

1. Do you have culturally specific employment services for different racial/ethnic groups?

No  Yes

- African American   
  African immigrant   
  Asian American   
  Asian immigrant  
 American Indian   
  Hispanic/Latino   
  Other

2. What strategies do you use for hard-to-engage participants? *Check all that apply.*

- Home visits   
  Sanction outreach services   
  Incentives SPECIFY:   
 Off-site meeting opportunities   
  Other

3. What types of job development do you do? *Check all that apply.*

- Sector job development   
  Individual job development   
  Other

4. Do you have an ongoing job development partnership or sector based job development with community employers to help participants with employment?

No  Yes *Check all activities employers provide.*

- Interview opportunities   
  Job skills training   
  Job placement   
  Job shadowing   
  On-site job training  
 Work experience   
  Helps plan training programs   
  Other

5. Do you provide job retention services to employed participants while they are receiving MFIP?

No  Yes *Check all that apply.*

- Available to assist with issues that develop on the job   
  Financial planning   
  Soft skills training  
 Mentoring   
  Transportation   
  Personal contact with the employee HOW OFTEN?   
 Other

How long do you provide job retention services?

Less than 3 months   
  3-6 months   
  7-12 months   
  More than one year

6. Do you provide job advancement services to employed participants?

No  Yes *Check all that apply.*

- Career laddering   
  Networking   
  Coaching/mentoring   
  Ongoing job search  
 Education/training   
  Other

7. Do you utilize any career pathways programs or skill assessment and credentialing programs for your participants?

No  Yes *Check all that apply.*

- Pathways to Prosperity (P2P)   
  Work Keys   
  National Career Readiness Certificate (NCRC)  
 Other SPECIFY:

**B. Service Models (continued)**

**Family Stabilization Services (FSS)**

1. Do you have professionals available to assist with FSS cases?

No  Yes *Check all that apply*

- Adult Mental Health professional
- Public Health Nurse
- Children's Mental Health professional
- Psychologist
- Chemical Health professional
- Vocational Rehabilitation worker
- Adult Rehabilitation Mental Health Services (ARMHS) worker
- Social Worker
- Other

2. Do you make referrals for children of FSS participants?

No  Yes *Check all that apply*

- Children's Mental Health Services
- Women, Infants and Children Program (WIC)
- Public Health Nurse home visiting services
- Other
- Child Wellness Check-ups

3. Are any of these services for children offered to non-FSS families?

No  Yes

**Services for families no longer on MFIP/DWP but under 200% of Federal Poverty Guideline**

1. Do you provide services to families who are not receiving DWP or MFIP assistance but are under 200% of the Federal Poverty Guideline (FPG)?

No  Yes *Check all the services that apply*

- ABE/ELL Classes
- Computer Lab Access
- Job postings
- Job retention services
- Support Services
- Other SPECIFY:
- Child care
- GED
- Referral to other programs
- Training/Job Skills Classes

**B. Service Models** (continued)

**Minnesota Family Investment Program (MFIP) Services for Teen Parents**

1. Are there specialized workers who work primarily with teens (for example, child care worker provides child care resources to teens only)?  
 No  Yes *Check all that apply for each age group*

Minors (under age 18)	Age 18/19	
<input type="checkbox"/>	<input type="checkbox"/>	Financial worker
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Employment service worker
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Social worker (Social Services)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Public health nurse
<input type="checkbox"/>	<input type="checkbox"/>	Child care worker
<input type="checkbox"/>	<input type="checkbox"/>	Child protection worker
<input type="checkbox"/>	<input type="checkbox"/>	Other job role

2. Is there a single point of contact for teens, that is, one staff with primary responsibility for keeping in contact with the teen, working with the teen, and making connections to other services? Respond for each age group separately. If yes for an age group, check the one position that serves this function within that age group.

No  Yes

**Minors (under age 18)**

- Financial worker
- Employment service worker
- Social worker (Social Services)
- Public health nurse
- Child care worker
- Child protection worker
- Other job role

**Age 18/19**

- Financial worker
- Employment service worker
- Social worker (Social Services)
- Public health nurse
- Child care worker
- Child protection worker
- Other job role

3. Does your county have an active partnership with the local public health agency to get teen parents enrolled and engaged in public health nurse home visiting services? *Check one for each age group.*

**Minors (under age 18)**

- Yes, mandatory
- Yes, voluntary
- No

**Age 18/19**

- Yes, mandatory
- Yes, voluntary
- No

## C. Measures

### Performance Measures

1. Performance-based funding is determined by a service area's annualized Self-Support Index value. Review the information and report links in this section to see the effect of performance on funding and reporting, based on Statute 256J.626, subdivision 7.

Each year a bonus to a service area's Consolidated Fund allocation will be based on its performance on the Self-Support Index in the previous April to March year.

The **three-year Self-Support Index (S-SI)**: This measure starts with all adults receiving MFIP or DWP cash assistance in a quarter and tracks what percentage of them, three years later, are no longer receiving family cash assistance or are working an average of 30 hours a week if still receiving cash assistance. Those who left MFIP after reaching 60 counted months and those who left due to 100 percent sanction are only counted as a success if they worked an average of 30 hours per week in their last month of eligibility or if they began receiving Supplemental Security Income (SSI) after family cash assistance ended. To provide fair comparisons across service areas, DHS calculates a "Range of Expected Performance" for the S-SI that is based on local caseload characteristics and economic conditions. The service area's Self-Support Index value is whether the service area was above, within, or below its expected Range.

The S-SI and Range are annualized for the four quarters in the April through March year ending in the reporting year before the funding year. See the annualized report on the MFIP Reports page on the DHS website for 2019 <https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4651F-ENG>. A service area with an annualized S-SI "above" its customized Range of Expected Performance for 2019 will receive a 2.5 percent bonus added to its Consolidated Fund allocation for calendar year 2020.

[MFIP Annualized S-SI and WPR report \(PDF\)](#)

If your service area is receiving a bonus, congratulations! Please share a success strategy here:

9999 characters remaining

If your service area performed "above" or "within," you can go to item 2.

If your service area performed "below" for 2018 and performs "below" again for 2019, you then will have to **negotiate a multi-year improvement plan** with the commissioner. If no improvement is shown by the end of the multiyear plan, the next year's allocation must be decreased by 2.5 percent, to remain in effect until the service area performs within or above its Range of Expected Performance.



**C. Measures** (continued)

**Racial/Ethnic Disparities**

- 2. A **racial/ethnic disparity** for a service area is defined as a **one-year Self-Support Index** that is five or more percentage points lower for a non-white racial/ethnic group than for the white group of MFIP/DWP-eligible adults in that area. Access the report "Two-Year Performance Trends of Racial/Ethnic and Immigrant Group". This report lists (1) service areas that have any racial/ethnic disparities requiring action and (2) the table of differences for all service areas.

[Performance Measures by Racial/Ethnic or Immigrant Group \(PDF\)](#)

**If your service area is in the disparity list, please answer the following question:**

DHS will work with you to reduce these disparities.

What strategies and action steps for each of the groups with disparities do you plan for the coming biennium?

9999 characters remaining

### D. Program Monitoring/Compliance

1. What procedures do you have in place to ensure that program funds are being used appropriately as directed in law? *Check all that apply.*

- Budget control procedures for approving expenditures
- Cash management procedures for ensuring program income is used for permitted activities
- Internal policies around use of funds, i.e. participant support services
- Other

2. What procedures do you have in place to ensure program policies are followed and applied accurately? *Check all that apply.*

- Case consultation
- Sample case review by workers
- Sample case review by supervisors
- Other SPECIFY:

**If your service area has not made changes to your random drug testing policy since the last BSA, go to Section E.**

3. What procedures/policies do you have in place for administering random drug tests of convicted drug felons on MFIP as required by Minnesota Statutes, section 256J.26, subdivision 1?

- Written policy within the MFIP unit
- Coordination with Corrections
- Currently establishing new policy/procedure(s)
- Other

### E. Collaboration and Communication with Others

1. How many employment services front-line staff are employed in your county or consortium?

How many employment services front-line staff in your county or consortium have MAXIS access?

How many managers/supervisors have MAXIS access?

2. Describe the process your service area uses to identify and resolve discrepancies between MAXIS and WF1 data in areas such as Family Stabilization Services coding, employment/hours, sanction status, etc.

Preliminary and Current month reports are reviewed to determine that cases are coded FSS appropriately, hours are entered, and sanctions are imposed correctly. Status update forms are submitted to document FSS coding, employment, and sanction status. ES staff and Financial Workers meet regularly to review cases to ensure cases are coded correctly and to share updates on cases.

7621 characters remaining

## F. Emergency Services

1. Does your county provide emergency or crisis services from your Consolidated Fund?

No  Yes

If yes, attach a copy of your emergency/crisis plan.

### SIBLEY COUNTY

#### EMERGENCY ASSISTANCE PROGRAMS

Minnesota Statutes 256J.626

Minnesota Statute 256D.06, Subd 2

Minnesota Rule 9500.1261

Revised 10/1/2015

Emergency Assistance Programs are designed to meet the emergency needs of people living in Sibley County. The unit must have an emergency that threatens their health and safety. Emergency needs are determined by the county agency that could pose a direct, immediate threat to the physical health or safety of the applicant or participant(s).

Consolidated Grant Fund will be used for a family with a minor child or a pregnant woman. "Minor child" means a child who is living in the same home of a parent or other caregiver, is not the parent of a child in the home, and is either less than 18 years of age or is under the age of 19 years and is a full time student in a secondary school or pursuing a full-time secondary level courses of vocational or technical training designed to fit students for gainful employment. (M.S. 256J.08, Subd 60)

Emergency General Assistance will be used for adults or married couples without children if they meet all eligibility requirements.

#### APPLICATION PROCESS:

Applicants must complete a combined application form and a Household Income & Expense Information sheet. A face to face interview is required along with the forms.

Mandatory verifications include: identity, citizenship, immigration status, and social security numbers of all household members; income and assets of all household members; proof of pregnancy, and current living expenses.

Verification will also be needed as to the nature of the emergency and the cost of alleviating the emergency situation. Examples of verification of the emergency include but are not limited to utility shut-off notices, unlawful detainers, and foreclosure notices.

NOTE: A copy of an unlawful detainer must accompany an eviction notice from a parent, sibling or other relative.

Verify all income received within the month of application and the previous two months. There are no excluded income resources.

#### ELIGIBILITY CRITERIA:

All criteria must be met.

1. Utilization of the funds is limited. If the applicant or any member in household has received EA funds in any Minnesota county during this time frame, they are ineligible to receive funds.
  - a) Consolidated Grant Fund is once in any 18 month period.
  - b) EGA is once in any 12 month period.
2. At least one person in the assistance unit must be a resident of Sibley County and have been a resident of the State of Minnesota for at least 30 days.
3. At least one person in the assistance unit must meet citizenship requirements as defined in MN Statute section 256J.11.
4. In the last 60 days, the household's adjusted gross income must be less than 200% of the FPG that is in effect at the time of application. Household must provide proof of income.
5. The emergency must not be caused by quitting a job or refusing employment without good cause.
6. The emergency must not be caused by the unit being sanctioned or because the caregiver is disqualified from other assistance. Individuals disqualified for fraud are ineligible for emergency programs during the disqualification period.
7. The unit must first attempt to resolve the emergency by all available means including:
  - a) Utilizing the applicant/household liquid assets and any available household income.
  - b) Making application for other program resources available in the community, including, but not limited to, fuel assistance and rental assistance.
8. During the two months prior to application, the applicant/household must not have used, without good cause, more than 50% of its adjusted gross income and liquid assets for purposes other than basic needs, the Thrifty Food Plan amount for the appropriate household size, child care expenses and/or car expenses (if employed), and court-ordered paid child support.
9. The unit must have made at least 2 payments in the past 12 months on the utility that is terminated or threatened. Payments from other sources do not meet this requirement.
10. In order for emergency assistance to be approved and issued, the assistance provided must resolve the crisis and enhance the stability of the unit. No assistance will be issued unless it is confirmed that the assistance, combined with payment by the applicant or funding from any other verified source, will continue or restore the needed service and resolve the crisis.
11. All emergency funds approved will be vendor paid whenever possible.

#### ELIGIBILITY DETERMINATION:

If all the above criteria are met, the county agency must resolve the emergency in the most cost effective manner. The emergency payment will be the minimum amount needed to resolve the emergency with the following caps on payments:

- a) Consolidated Grant fund cannot exceed four times the cash portion of the current calendar year MFIP transitional standard or the following, whichever is less: Past due rent/mortgage payments, no more than two months of previously unpaid rent/mortgage

1537 characters remaining

### G. Other

#### Administrative Cap Waiver

Minnesota Family Investment Program (MFIP) allows counties to request a waiver of the MFIP administrative cap (currently at 7.5%) for providing supported employment, uncompensated work or community work experience program for a major segment of the county's MFIP population. Counties that are operating such a program may request up to 15% administrative costs.

If your county is interested in applying for the waiver for the coming biennium, please complete the following four questions.

1. Describe the activity(s) you will provide.

4000 characters remaining

2. Explain the reasons for the increased administrative cost.

4000 characters remaining

3. Describe the target population and number of people expected to be served.

4000 characters remaining

4. Describe how the unpaid work experience is designed to impart skills and what steps are taken to help participants move from unpaid work to paid work.

4000 characters remaining

**G. Other** (continued)

**Addendum for Unpaid Work Experience Activities**

If your county is providing unpaid work experience activities for MFIP participants, please fill out the [Unpaid Work Experience Form](#). Email the completed form to [Tria.Chang@state.mn.us](mailto:Tria.Chang@state.mn.us).

**Provider Choice**

Does your county:

- Have at least two employment and training services providers. Go to Section H.
- Have a CareerForce center that provides multiple employment and training services, offers multiple services options under a collaborative effort and can document that participants have choice among employment and training services designed to meet specialized needs. Go to Section H.
- Intend to submit a financial hardship request.

**G. Other** (continued)

**Financial Hardship Request**

FINANCIAL HARDSHIP - Exception to Choice of Employment Service Providers Requirement

MFIP provisions require counties to make a choice of at least two employment service providers available to participants unless a workforce center is being utilized (Minnesota Statutes, section 256J.50, subdivision 8). Counties may request an exception if meeting this requirement results in a financial hardship (Minnesota Statutes, section 256J.50, subdivision 9).

A financial hardship is defined as a county's inability to provide the minimum level of service for all programs if a disproportionate amount of the MFIP consolidated fund must be used to cover the costs of purchasing employment services from two providers or the cost of contracting with a workforce center.

To request approval of a financial hardship exception from the choice of provider requirement, please provide the following information.

1. If the county had a choice of providers in calendar year 2019, describe:
  - factors that have changed which indicate a financial hardship
  - why the hardship is expected to persist in the near future and
  - the magnitude of the hardship, which makes limiting delivery of employment services the best financial option for the county.

2000 characters remaining

2. Summarize options explored by the county, including use of other partners in a workforce center or other community agencies, such as a Community Action Program or a technical college. The summary should also include:
  - major factors which prevent the county from utilizing these options and include a cost analysis of each option considered; and
  - the process used to determine the cost of other options (RFP or other county process).

2000 characters remaining

3. If the county proposes to directly deliver MFIP employment services, provide a budget and staffing plan that clearly indicates consolidated funds will not be used to supplant county funds. The description should include information about what steps will be taken to ensure that county staff have the experience and skills to deliver employment services.

2000 characters remaining

The Department of Human Services (DHS) and the Department of Employment and Economic (DEED) will also review the amount budgeted by the county for employment and training during calendar year 2019 and use this amount as a guide to determine whether the amount budgeted by the county for calendar year 2020 is reasonable.

If a financial hardship is approved, DHS and DEED will closely monitor county programs to ensure outcomes are achieved and services are being delivered consistent with state law.

### H. Budget

Click on the link below to review your service area's 2020 MFIP allocation and Federal Funding Sources:

[MFIP Consolidated Fund \(PDF\)](#)

In the budget table, indicate the amount and percentage for each item listed for the budget line items for calendar years 2020-2021.  
Also note:

- Refer the 2020-21 Minnesota Family Investment Program (MFIP) Biennial Service Agreement (BSA) Guidelines Bulletin section, "Allowable Services under MFIP Consolidated Fund."
- Total percent must equal 100.
- MFIP administration is capped at 7.5 percent unless the county is approved for an administrative cap waiver. To apply for the administrative cap waiver, respond to the questions in Section G under Administrative Cap Waiver.
- The percentage of Employment Services DWP budget should be significantly less than, the Employment Services MFIP budget.
- Income maintenance administration is reasonable in comparison to the whole budget.
- Ensure the Emergency Assistance/Crisis Services plan is included if funds are allocated.
- If "other" is used, briefly state or describe the line item. "Other" expenditures include any costs that are not related to administering MFIP, DWP or Emergency program services or atypical costs. All services must be an allowable service under the MFIP Consolidated Fund.
- Email Brandon Riley at brandon.riley@state.mn.us, if you need assistance or have questions with the budget section.

#### 2020 Budget

Budgeted Amount	Percent	Line Items
<input type="text" value="24,317.00"/>	15.57%	Employment Services (DWP)
<input type="text" value="82,608.00"/>	52.91%	Employment Services (MFIP)
<input type="text" value="14,000.00"/>	8.97%	Emergency Services/Crisis Fund
<input type="text" value="11,710.00"/>	7.50%	Administration (cap at 7.5%)
<input type="text" value="23,500.00"/>	15.05%	Income Maintenance Administration
<input type="text" value="0.00"/>	0.00%	Incentives (Include the total amount of funds budgeted for participant incentives but don't include support services here)
<input type="text" value="0.00"/>	0.00%	Capital Expenditures
<input type="text"/>	0.00%	Other 1 <input type="text"/>
<input type="text"/>	0.00%	Other 2 <input type="text"/>
<b>\$156,135.00</b>	<b>100.00%</b>	<b>Total</b>

#### 2021 Budget

Budgeted Amount	Percent	Line Items
<input type="text" value="24,317.00"/>	15.57%	Employment Services (DWP)
<input type="text" value="82,608.00"/>	52.91%	Employment Services (MFIP)
<input type="text" value="14,000.00"/>	8.97%	Emergency Services/Crisis Fund
<input type="text" value="11,710.00"/>	7.50%	Administration (cap at 7.5%)
<input type="text" value="23,500.00"/>	15.05%	Income Maintenance Administration
<input type="text" value="0.00"/>	0.00%	Incentives (Include the total amount of funds budgeted for participant incentives but don't include support services here)
<input type="text" value="0.00"/>	0.00%	Capital Expenditures
<input type="text"/>	0.00%	Other 1 <input type="text"/>
<input type="text"/>	0.00%	Other 2 <input type="text"/>
<b>\$156,135.00</b>	<b>100.00%</b>	<b>Total</b>



## Certifications and Assurances

### Public Input

Prior to submission, did the county solicit public input for at least 30 days on the contents of the agreement?

No  Yes

Was public input received?

No  Yes

If received but not used, please explain.

4000 characters remaining

### Assurances

It is understood and agreed by the county board that funds granted pursuant to this service agreement will be expended for the purposes outlined in Minnesota Statutes, section 256J; that the commissioner of the Minnesota Department of Human Services (hereafter department) has the authority to review and monitor compliance with the service agreement, that documentation of compliance will be available for audit; that the county shall make reasonable efforts to comply with all MFIP requirements, including efforts to identify and apply for available state and federal funding for services within the limits of available funding; and that the county agrees to operate MFIP in accordance with state law and federal law and guidance from the department.

Counties may use the funds for any allowable expenditures under subdivision 2, including case management outlined in Minnesota Statutes, section 256J.

Counties or Tribes (and all tiers of subgrantees) must use the U.S. Office of Management and Budget (OMB) Uniform Grant Guidance, Code of Federal Regulations, title 2, subtitle A, chapter II, part 200, as applicable (including modifications) in the administration of all DHS federal and/or state funded grants. [https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200\\_main\\_02.tpl](https://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl)

This allocation is funded with 8% state funds and 92% federal TANF funds and paid quarterly. The catalog of Federal Domestic Assistance (CDFA) Number is 93.558 – Temporary Assistance for Needy Families (TANF).

The Award number for the period of January 1, 2020 – December 31, 2021 will be published with the MFIP Consolidated Fund Calendar Year 2020 and Calendar Year 2021 Allocation with Performance Bonus.

### Service Agreement Certification

Checking this box certifies that this 2020-2021 MFIP Biennial Service Agreement has been prepared as required and approved by the county board(s) under the provisions of Minnesota Statutes, section 256J. In the box below, state the name of the chair of the county board of commissioners or authorized designee, their mailing address and the name of the county.

<b>DATE OF CERTIFICATION</b>	<b>NAME (CHAIR OR DESIGNEE)</b>	<b>COUNTY</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>MAILING ADDRESS</b>		<b>CITY</b>
<input type="text"/>		<input type="text"/>
	<b>STATE</b>	<b>ZIP CODE</b>
	<input type="text"/>	<input type="text"/>

If your county agency is unable to complete your BSA by October 15, 2019 you will need to request an extension. Please email [Tria.Chang@state.mn.us](mailto:Tria.Chang@state.mn.us) to provide additional information about why you were not able to compete this form and when you expect to submit the form by.

### Save or Submit

**To save your work**, click the 'Save Form for Later' button. Your information will be saved, and you may finish the form later.

**To submit your information to DHS**, click the 'Submit Final Form' button.