**RSA-2 Annual Vocational Rehabilitation Program/Cost Report for Michigan Blind 2013**

**Schedule I. Total Expenditures**

|  |  |
| --- | --- |
| **1. Administration**  | 2,783,344 |
| a) Admin Costs paid with Title VI B funds  | 0 |
| b) Indirect Costs  | 183,989 |

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| **2. Services to Individuals with Disabilities** |
| A. Services Provided by State VR Agency Personnel |
| 1. Employed at Agency Operated Community Rehabilitation Programs |
| a) Assessment, Counseling, Guidance, and Placement  | 0 |
| b) Other Services  | 0 |
| 2. Employed Elsewhere  |  |
| a) Assessment, Counseling, Guidance, and Placement  | 0 |
| b) Other Services  | 0 |
| B. Services purchased by State VR Agency From: |  |
| 1. Public Community Rehabilitation Programs  | 220,241 |
| 2. Private Community Rehabilitation Programs  | 0 |
| 3. Other Public Vendors  | 232,316 |
| 4. Other Private Vendors  | 4,528,361 |

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| **3. Services for Groups of Individuals with Disabilities** |
| a) Establishment, Development or Improvement of Community Rehabilitation Programs  | 0 |
| b) Construction of Facilities for Community Rehabilitation Programs  | 0 |
| c) Business Enterprise Program  | 4,003,446 |
| d) Other  | 451,800 |

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| --- | --- |
| **4. Total Expenditures (Sum of all the entries for items 1 thru 3 except lines 1a and 1b)**  | 12,219,508 |
| **5. Innovation & Expansion Activities**  | 100,996 |

**Schedule II. Number of Individuals Served and Expenditures by Service Category**

\* For FY 2000 reporting ONLY, please refer to the policy directive that promulgated this report form for information about the applicability of a reporting variance that may affect most of the items on this schedule.

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| --- | --- | --- |
| Type of Service | **Number of Individuals** | **Amount** |
| 1. Assessment, Counseling, Guidance and Placement (Provided by State VR Agency Personnel) | 983 |    |
| 2. Assessment (Purchased only) | 448 | 442,054 |
| 3. Diagnosis & Treatment of Physical and Mental Impairments | 110 | 72,815 |
| 4. Training |    |    |
| **a. Postsecondary Institution of Higher Education** | 219 | 1,905,566 |
| **b. Job Readiness and Augmentative Skills Training** | 123 | 226,685 |
| **c. Vocational and Occupational Skills Training** | 143 | 237,453 |
| **d. All Other** | 189 | 202,503 |
| **e. Total** | 674 | 2,572,207 |
| 5. Maintenance | 94 | 419,972 |
| 6. Transportation | 167 | 81,161 |
| 7. Personal Assistance Services | 5 | 240 |
| 8. Placement (Purchased only) | 113 | 180,202 |
| 9. All Other | 722 | 1,212,267 |
| 10. Total No. of Individuals and Expenditures | 0 | 4,980,918 |
| 11. Post-Employment Services | 36 | 26,467 |
| 12. Rehabilitation Technology Services | 13 | 0 |
| 13. Small Business Enterprises | 0 | 0 |
| 14. Total Section 110 Funds Expended on Services |    | 4,980,918 |
| 15. Total Title VI-B Funds Expended on Services |    | 0 |

**Schedule III. Person Years (report whole years only)**

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| --- | --- | --- | --- |
| Category | **(1) Number of Years** | **(2) 110 ONLY** | **(3) Title VI B** |
| 1. Administrative Staff | 12 | XXXXX | XXXXX |
| 2. Counselor Staff | 23 | XXXXX | XXXXX |
| 3. Staff Supporting Counselor Activities | 37 | XXXXX | XXXXX |
| 4. Other Staff | 10 | XXXXX | XXXXX |
| 5. Total | 82 | 82 | 0 |

**Schedule IV. Expenditures From Title VI B Funds and Other Rehabilitation Funds**

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| --- | --- |
| 1. Expenditures From Title VI B Funds | 170,755 |
| 2. Expenditures From Other Rehabilitation Funds | 0 |

**Schedule V. Carryover funds**

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| --- | --- |
| 1. Amount of current Fiscal Year Section 110 Allotment carried over to next FY | 7,327,329 |
| 2. Amount of previous Fiscal Year Section 110 Allotment carried over and expended this FY | 8,142,221 |
| 3. Amount of current Fiscal Year Title VI B Allotment carried over to next FY | 0 |
| 4. Amount of previous Fiscal Year Title VI B Allotment carried over and expended this FY | 82,478 |
| 5. Amount of current Fiscal Year Program Income carried over to the next FY | 0 |
| 6. Amount of previous Fiscal Year Program Income carried over and expended this FY | 0 |

**Certification**

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| **Approved**Signed | Y |
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