

**Office of Economic Opportunity  
APPLICATION FOR COMMUNITY ACTION PROGRAM**

FORM APPROVED.  
BUDGET BUREAU NO. 116-R019

**BUDGET FOR COMPONENT PROJECT**

This form is to accompany each component project form (CAP 6, CAP 7, or CAP 8) in applying for a grant under Sections 204, 205, or 206 of Title II-A, Economic Opportunity Act of 1964. Applicants are not required to use this form -- they may substitute a typed budget which contains the same information in the same order as on the form.

NAME OF APPLICANT <i>WASH, etc</i>	DO NOT FILL IN: (For Administrative Use)
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BRIEF TITLE OF PROJECT <i>Summer Headstart Program</i>	COMPONENT PROJECT NO.
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**B-1.0 PERSONNEL**

**B-1.1 PERSONNEL EMPLOYED BY APPLICANT AGENCY**

NUMBER OF PERSONS	POSITION OR TITLE	SALARY PER MONTH	PERCENT OF TIME ON PROJECT	MONTHS TO BE EMPLOYED	COST
1	Program Director (Head Teacher)	735.00	100	2.5	\$1,838.00
1	Teacher	598.00	100	2.5	1,445.00
2	Assistant Teacher	307.00	100	2.5	1,535.00
4	Volunteer Aides @ \$1.60/hr	128.00	50	2.5	1,280.00*
1	Coordinator (Parent and Health Services)	525.00	50	2.5	656.00
1	Social Worker Aide	307.00	100	2.5	767.00
1	Public Health Nurse	500	83%	2.5	280.00*
<b>Total</b>					<b>\$7,801.00</b>

COST OF FRINGE BENEFITS (Indicate basis for estimate)

9% of Total      702.00

**SUB-TOTAL, PERSONNEL EMPLOYED BY APPLICANT AGENCY      \$ 8,503**

**B-1.2 PERSONNEL EMPLOYED BY DELEGATE AGENCY(IES)**

NUMBER OF PERSONS	POSITION OR TITLE	SALARY PER MONTH	PERCENT OF TIME ON PROJECT	MONTHS TO BE EMPLOYED	COST
	<i>indicates</i>				
	<i>*Voluntary Services for non-Federal share.</i>				

COST OF FRINGE BENEFITS (Indicate basis for estimate)

**SUB-TOTAL, PERSONNEL EMPLOYED BY DELEGATE AGENCY(IES)      \$**

**TOTAL, PERSONNEL      \$**