

-- EXAMPLE --

Part 5 - SERVICE DELIVERY SCHEDULE (Word)

Reimbursement is based on actual service delivery.

All services listed below MUST have a corresponding narrative description in Section C, Part Four and be included in the Service Implementation Plan.

SC	Description of Service or Activity	Description of Service Unit *	Units per Month (Average Frequency)	Number of Participants per Service or Activity	Number of Participants each month	Cost per Service or Activity	Total Units per Year	Total Cost per Year
	Assessments	1-hour meeting	4	1 family	4	\$95	48	\$4,560
	Center-based Parent Education	2-hour class	4	8-10 families	8-10	\$145	48	\$6,960
	Service Coordination/Case Management	1-hour case documentation (once per family per month)	10	1 family	10	\$35	120	\$4,200
	Information & Referral	15 minutes per referral (2 referrals per family per month)	20	1 family	10	\$20	240	\$4,800
	Anger Management Classes	1-hour class	4	8-10 families	8-10	\$75	48	\$3,600
	Parent/Child Activities	2 to 3 hour activity	1	8-10 families	8-10	\$250	12	\$3,000
						\$		\$
						\$		\$
						\$		\$
								\$27,120
								Total Cost of Services
								\$20,340
								75% Federal Award Request
								\$ 6,780
								25% Cash Match Contribution

**A service unit is defined as a single direct contact time to be invoiced for one unit cost.
For example: one 2-hour class, 1 hour home visit, 4-hour session, 15 minute telephone contact, as determined by the contractor*

Agency Name: Parent Help Center	Program ID#: 888-9999
Program Name: Helping Hand Program	Date: August 24, 2009
Prepared by: Joanna Johnson	Email: jjohnson@email.com