

# VOCA Personnel Budget

[VOCA Personnel Budget Report](#)

**Agency Name:** University of Florida Board of Trustees

Complete the summary table and salary grid below and provide information about each position requested. The position title included in each summary table must be exactly as it appears on the job description. In the Budget Narrative section indicate if the salary/benefit expenses listed include raises and increases in benefit costs, as well as any other information needed to support the request.

Provide a job description for all proposed VOCA-funded staff and indicate the percentage of time by each job duty (do not lump duties under one header, unless each sub-duty also includes percentages). Failure to provide VOCA allowable job descriptions may result in a reduction to the request. The job description must reflect VOCA allowable activities that are equal to or greater than the percentage of the position that is requested as VOCA funded and/or utilized as Match.

RATE: A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b>	CLINICAL CASE MANAGER/CASE COORDINATOR *	\$67,260.09	\$16,815.02	25% *	.25
<b>Personnel Narrative:</b>	Functions as a member of a multidisciplinary team to provide services to victims of child abuse and neglect and their families*				
<b>Sub-Total</b>		\$67,260.09	\$16,815.02		.25

**Agency Contribution for Personnel Expenses**

\$50,445.07

**Pay Schedule: (choose one from the drop-down menu)**

Bi-Weekly \*

**Position Number:**

1

Hours per week =

40.000 \*

Hourly Rate =

\$23.73 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$49,358.40		\$49,358.40	\$1,898.40
<b>FICA</b>		6.9000% *	\$3,405.73	\$130.99

Retirement		7.8000% *	\$3,849.96	\$148.08
Health Ins.			\$321.38 *	\$12.36
Life Ins.			\$1.79 *	\$.07
Dental Ins.			\$0.00 *	\$0.00
Workers Comp		.7000% *	\$345.51	\$13.29
Unemployment (1st \$7K)		.1000% *	\$7.00	\$.27
Other:			\$9,970.32	\$383.47
<b>TOTAL</b>			<b>\$67,260.09</b>	<b>\$2,586.93</b>

Explanation (if applicable):

*FBP fringe rate components employer cost also includes other cost other disability , leave cash out shortfall/overage prior years*

Is this position used as a matching expense Y/N?

No \*

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RATE: A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b>	VOCA CLINICAL COORDINATOR *	\$64,150.24	\$32,075.12	50% *	.50
<b>Personnel Narrative:</b>	* Functions as a member of a multidisciplinary team to provide services to victims of child abuse, neglect, and their families.				
<b>Sub-Total</b>		\$64,150.24	\$32,075.12		.50

**Agency Contribution for Personnel Expenses**

\$32,075.12

**Pay Schedule: (choose one from the drop-down menu)**

Bi-Weekly \*

**Position Number:**

10

Hours per week =

40.000 \*

Hourly Rate =

\$22.62 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$47,049.60		\$47,049.60	\$1,809.60
<b>FICA</b>		6.9000% *	\$3,246.42	\$124.86

<b>Retirement</b>		7.8000% *	\$3,669.87	\$141.15
<b>Health Ins.</b>			\$342.21 *	\$13.16
<b>Life Ins.</b>			\$1.79 *	\$.07
<b>Dental Ins.</b>			\$0.00 *	\$0.00
<b>Workers Comp</b>		.7000% *	\$329.35	\$12.67
<b>Unemployment (1st \$7K)</b>		.1000% *	\$7.00	\$.27
<b>Other:</b>			\$9,504.00	\$365.54
<b>TOTAL</b>			<b>\$64,150.24</b>	<b>\$2,467.32</b>

Explanation (if applicable):

*FBP fringe rate components employer cost also includes other cost other disability, leave cash out shortfall/overage prior years.*

Is this position used as a matching expense Y/N?

No \*

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RATE: A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b>	VOCA CLINICAL COORDINATOR *	\$70,919.34	\$17,729.84	25% *	.25
<b>Personnel Narrative:</b>	* Functions as a member of a multidisciplinary team to provide services to victims of child abuse, neglect, and their families.				
<b>Sub-Total</b>		\$70,919.34	\$17,729.84		.25

**Agency Contribution for Personnel Expenses**

\$53,189.50

**Pay Schedule: (choose one from the drop-down menu)**

Bi-Weekly \*

**Position Number:**

11

Hours per week =

40.000 \*

Hourly Rate =

\$24.88 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$51,750.40		\$51,750.40	\$1,990.40
<b>FICA</b>		6.9000% *	\$3,570.78	\$137.34

<b>Retirement</b>		7.8000% *	\$4,036.53	\$155.25
<b>Health Ins.</b>			\$736.59 *	\$28.33
<b>Life Ins.</b>			\$1.79 *	\$.07
<b>Dental Ins.</b>			\$0.00 *	\$0.00
<b>Workers Comp</b>		.7000% *	\$362.25	\$13.93
<b>Unemployment (1st \$7K)</b>		.1000% *	\$7.00	\$.27
<b>Other:</b>			\$10,454.00	\$402.08
<b>TOTAL</b>			<b>\$70,919.34</b>	<b>\$2,727.67</b>

Explanation (if applicable):

*FBP fringe rate components employer cost also includes other cost other disability, leave cash out shortfall/overage prior years.*

Is this position used as a matching expense Y/N?

No \*

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RATE: A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b>	VOCA CLINICAL COORDINATOR *	\$76,869.48	\$19,217.37	25% *	.25
<b>Personnel Narrative:</b>	* Functions as a member of a multidisciplinary team to provide services to victims of child abuse, neglect, and their familis.				
<b>Sub-Total</b>		\$76,869.48	\$19,217.37		.25

**Agency Contribution for Personnel Expenses**

\$57,652.11

**Pay Schedule: (choose one from the drop-down menu)**

Bi-Weekly \*

**Position Number:**

12

Hours per week =

40.000 \*

Hourly Rate =

\$27.18 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$56,534.40		\$56,534.40	\$2,174.40
<b>FICA</b>		6.9000% *	\$3,900.87	\$150.03

<b>Retirement</b>		7.8000% *	\$4,409.68	\$169.60
<b>Health Ins.</b>			\$200.00 *	\$7.69
<b>Life Ins.</b>			\$1.79 *	\$0.07
<b>Dental Ins.</b>			\$0.00 *	\$0.00
<b>Workers Comp</b>		.7000% *	\$395.74	\$15.22
<b>Unemployment (1st \$7K)</b>		.1000% *	\$7.00	\$0.27
<b>Other:</b>			\$11,420.00	\$439.23
<b>TOTAL</b>			<b>\$76,869.48</b>	<b>\$2,956.51</b>

Explanation (if applicable):

*FBP fringe rate components employer cost also includes other cost other disability, leave cash out shortfall/overage prior years.*

Is this position used as a matching expense Y/N?

No \*



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RATE: A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b>	<i>VOCA CLINICAL COORDINATOR *</i>	\$69,847.22	\$17,461.81	25% *	.25
<b>Personnel Narrative:</b>	<i>Functions as a member of a multidisciplinary team to provide services to victims of child abuse, neglect, and their families.</i>				
	<b>Sub-Total</b>	\$69,847.22	\$17,461.81		.25

**Agency Contribution for Personnel Expenses**

\$52,385.41

**Pay Schedule: (choose one from the drop-down menu)**

*Bi-Weekly \**

**Position Number:**

13

**Hours per week =**

40.000 \*

**Hourly Rate =**

\$24.50 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$50,960.00		\$50,960.00	\$1,960.00
<b>FICA</b>		6.9000% *	\$3,516.24	\$135.24

<b>Retirement</b>		7.8000% *	\$3,974.88	\$152.88
<b>Health Ins.</b>			\$736.59 *	\$28.33
<b>Life Ins.</b>			\$1.79 *	\$.07
<b>Dental Ins.</b>			\$0.00 *	\$0.00
<b>Workers Comp</b>		.7000% *	\$356.72	\$13.72
<b>Unemployment (1st \$7K)</b>		.1000% *	\$7.00	\$.27
<b>Other:</b>			\$10,294.00	\$395.92
<b>TOTAL</b>			<b>\$69,847.22</b>	<b>\$2,686.43</b>

Explanation (if applicable):

*-FBP fringe rate components employer cost also includes other cost other disability, leave cash out shortfall/overage prior years.*

Is this position used as a matching expense Y/N?

No \*

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**Personnel:**

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b>	VOCA CLINICAL COORDINATOR *	\$65,926.78	\$16,481.70	25% *	.25
<b>Personnel Narrative:</b>	* Functions as a member of a multidisciplinary team to provide services to victims of child abuse, neglect, and their families.				
<b>Sub-Total</b>		\$65,926.78	\$16,481.70		.25

**Agency Contribution for Personnel Expenses**

\$49,445.08

**Pay Schedule: (choose one from the drop-down menu)**

Bi-Weekly \*

**Position Number:**

14

Hours per week =

40.000 \*

Hourly Rate =

\$23.11 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$48,068.80		\$48,068.80	\$1,848.80
<b>FICA</b>		6.9000% *	\$3,316.75	\$127.57

<b>Retirement</b>		7.8000% *	\$3,749.37	\$144.21
<b>Health Ins.</b>			\$736.59 *	\$28.33
<b>Life Ins.</b>			\$1.79 *	\$.07
<b>Dental Ins.</b>			\$0.00 *	\$0.00
<b>Workers Comp</b>		.7000% *	\$336.48	\$12.94
<b>Unemployment (1st \$7K)</b>		.1000% *	\$7.00	\$.27
<b>Other:</b>			\$9,710.00	\$373.46
<b>TOTAL</b>			<b>\$65,926.78</b>	<b>\$2,535.65</b>

Explanation (if applicable):

*FBP fringe rate components employer cost also includes other cost other disability, leave cash out shortfall/overage prior years.*

Is this position used as a matching expense Y/N?

No \*

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**Personnel:**

	Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b> 2020-2021 Increased Funding*	\$0.00	\$0.00	100%*	0.00
<b>Personnel Narrative:</b>	Additional funding request from the 2020-2021 VOCA Grant application for approved VOCA allowable costs, due to increased budget authority. Funding reallocated as part of budget modification 1.*			
<b>Sub-Total</b>	\$0.00	\$0.00		0.00

**Agency Contribution for Personnel Expenses**

\$0.00

**Pay Schedule: (choose one from the drop-down menu)**

Bi-Weekly\*

**Position Number:**

15

**Hours per week =**

0.000\*

**Hourly Rate =**

\$0.00\*

	RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$0.00	\$0.00	\$0.00
<b>FICA</b>	0.0000%*	\$0.00	\$0.00
<b>Retirement</b>	0.0000%*	\$0.00	\$0.00

Health Ins.			\$0.00 *	\$0.00
Life Ins.			\$0.00 *	\$0.00
Dental Ins.			\$0.00 *	\$0.00
Workers Comp		0.0000% *	\$0.00	\$0.00
Unemployment (1st \$7K)		0.0000% *	\$0.00	\$0.00
Other:			\$0.00	\$0.00
<b>TOTAL</b>			<b>\$0.00</b>	<b>\$0.00</b>

Explanation (if applicable):

*Additional funding request from the 2020-2021 VOCA Grant application for approved VOCA allowable costs, due to increased budget authority*

Is this position used as a matching expense Y/N?

No \*

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**Personnel:**

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b>	ASSISTANT DIR / VIC ADV *	\$74,501.42	\$74,501.42	100% *	1.00
<b>Personnel Narrative:</b>	Supervises member of a multidisciplinary team to provide services to victims of child abuse and neglect and their families *				
<b>Sub-Total</b>		\$74,501.42	\$74,501.42		1.00

**Agency Contribution for Personnel Expenses**

\$0.00

**Pay Schedule: (choose one from the drop-down menu)**

Bi-Weekly \*

**Position Number:**

2

Hours per week =

40.000 \*

Hourly Rate =

\$26.29 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$54,683.20		\$54,683.20	\$2,103.20
<b>FICA</b>		6.9000% *	\$3,773.14	\$145.12

<b>Retirement</b>		7.8000% *	\$4,265.29	\$164.05
<b>Health Ins.</b>			\$342.21 *	\$13.16
<b>Life Ins.</b>			\$1.79 *	\$.07
<b>Dental Ins.</b>			\$0.00 *	\$0.00
<b>Workers Comp</b>		.7000% *	\$382.78	\$14.72
<b>Unemployment (1st \$7K)</b>		.1000% *	\$7.00	\$.27
<b>Other:</b>			\$11,046.01	\$424.85
<b>TOTAL</b>			<b>\$74,501.42</b>	<b>\$2,865.44</b>

Explanation (if applicable):

*FBP fringe rate components employer cost also includes other cost other disability , leave cash out shortfall/overage prior years.*

Is this position used as a matching expense Y/N?

No \*



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**Personnel:**

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<b>Position:</b>	<i>Victims Advocate/CLINICAL CASE MANAGER *</i>	\$58,336.31	\$58,336.31	100% *	1.00
<b>Personnel Narrative:</b>	<i>Functions as a member of a multidisciplinary team to provide services to victims of child abuse, neglect, and their families.</i>				
	<b>Sub-Total</b>	\$58,336.31	\$58,336.31		1.00

**Agency Contribution for Personnel Expenses**

\$0.00

**Pay Schedule: (choose one from the drop-down menu)**

*Bi-Weekly \**

**Position Number:**

3

**Hours per week =**

40.000 \*

**Hourly Rate =**

\$20.68 \*

	RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$43,014.40	\$43,014.40	\$1,654.40

<b>FICA</b>		6.9000% *	\$2,967.99	\$114.15
<b>Retirement</b>		7.8000% *	\$3,355.12	\$129.04
<b>Health Ins.</b>			\$0.00 *	\$0.00
<b>Life Ins.</b>			\$1.79 *	\$.07
<b>Dental Ins.</b>			\$0.00 *	\$0.00
<b>Workers Comp</b>		.7000% *	\$301.10	\$11.58
<b>Unemployment (1st \$7K)</b>		.1000% *	\$7.00	\$.27
<b>Other:</b>			\$8,688.91	\$334.19
<b>TOTAL</b>			<b>\$58,336.31</b>	<b>\$2,243.70</b>

Explanation (if applicable):

*FBP fringe rate components employer cost also includes other cost other disability, leave cash out shortfall/overage prior years*

Is this position used as a matching expense Y/N?

No \*

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**Personnel:**

	Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b> clinical assistant professor*	\$42,861.50	\$10,715.38	25%*	.25
<b>Personnel Narrative:</b>	CLINICAL ASSISTANT PROFESSOR HAS OVER-SITE OF THE CPT/VOCA AND SATP PROGRAMS.CONDUCTS VOCA/ SATP THERAPY RELATED TRAINING, CONDUCTS PSYCHOLOGICAL INTERVIEWS AND TESTING. REVIEWS AND APPROVES PROJECT NOTES. IS ACCOUNTABLE FOR VOCA /SATP SITE VISITS.*			
<b>Sub-Total</b>	<b>\$42,861.50</b>	<b>\$10,715.38</b>		<b>.25</b>

**Agency Contribution for Personnel Expenses**

\$32,146.12

**Pay Schedule: (choose one from the drop-down menu)**

*Bi-Weekly\**

**Position Number:**

4

**Hours per week =**

40.000\*

**Hourly Rate =**

\$20.60\*

	RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$42,848.00	\$42,848.00	\$1,648.00
<b>FICA</b>	0.0000%*	\$0.00	\$0.00

Retirement		0.0000% *	\$0.00	\$0.00
Health Ins.			\$0.00 *	\$0.00
Life Ins.			\$13.50 *	\$.52
Dental Ins.			\$0.00 *	\$0.00
Workers Comp		0.0000% *	\$0.00	\$0.00
Unemployment (1st \$7K)		0.0000% *	\$0.00	\$0.00
Other:			\$	\$0.00
<b>TOTAL</b>			<b>\$42,861.50</b>	<b>\$1,648.52</b>

Explanation (if applicable):

*FBP fringe rate components employer cost also includes other cost other disability, leave cash out shortfall/overage prior years.*

Is this position used as a matching expense Y/N?

No \*

# VOCA Personnel Budget

[VOCA Personnel Budget Report](#)

**Agency Name:** *University of Florida Board of Trustees*

Complete the summary table and salary grid below and provide information about each position requested. The position title included in each summary table must be exactly as it appears on the job description. In the Budget Narrative section indicate if the salary/benefit expenses listed include raises and increases in benefit costs, as well as any other information needed to support the request.

Provide a job description for all proposed VOCA-funded staff and indicate the percentage of time by each job duty (do not lump duties under one header, unless each sub-duty also includes percentages). Failure to provide VOCA allowable job descriptions may result in a reduction to the request. The job description must reflect VOCA allowable activities that are equal to or greater than the percentage of the position that is requested as VOCA funded and/or utilized as Match.

RATE: A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b>	<i>VOCA CLINICAL CASE VICTIMS ADVOCATE/*</i>	\$59,535.57	\$59,535.57	100%*	1.00
<b>Personnel Narrative:</b>	<i>Functions as a member of a multidisciplinary team to provide services to victims of child abuse, neglect, and their families.</i> *				
<b>Sub-Total</b>		\$59,535.57	\$59,535.57		1.00

**Agency Contribution for Personnel Expenses**

\$0.00

**Pay Schedule: (choose one from the drop-down menu)**

*Bi-Weekly\**

**Position Number:**

5

**Hours per week =**

40.000\*

**Hourly Rate =**

\$21.00\*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$43,680.00		\$43,680.00	\$1,680.00

<b>FICA</b>		6.9000% *	\$3,013.92	\$115.92
<b>Retirement</b>		7.8000% *	\$3,407.04	\$131.04
<b>Health Ins.</b>			\$296.70 *	\$11.41
<b>Life Ins.</b>			\$1.79 *	\$.07
<b>Dental Ins.</b>			\$0.00 *	\$0.00
<b>Workers Comp</b>		.7000% *	\$305.76	\$11.76
<b>Unemployment (1st \$7K)</b>		.1000% *	\$7.00	\$.27
<b>Other:</b>			\$8,823.36	\$339.36
<b>TOTAL</b>			<b>\$59,535.57</b>	<b>\$2,289.83</b>

Explanation (if applicable):

*Open 13-FBP fringe rate components employer cost also includes other cost other disability, leave cash out shortfall/overage prior years.*

Is this position used as a matching expense Y/N?

No \*

# VOCA Personnel Budget

[VOCA Personnel Budget Report](#)

**Agency Name:** University of Florida Board of Trustees

Complete the summary table and salary grid below and provide information about each position requested. The position title included in each summary table must be exactly as it appears on the job description. In the Budget Narrative section indicate if the salary/benefit expenses listed include raises and increases in benefit costs, as well as any other information needed to support the request.

Provide a job description for all proposed VOCA-funded staff and indicate the percentage of time by each job duty (do not lump duties under one header, unless each sub-duty also includes percentages). Failure to provide VOCA allowable job descriptions may result in a reduction to the request. The job description must reflect VOCA allowable activities that are equal to or greater than the percentage of the position that is requested as VOCA funded and/or utilized as Match.

RATE: A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b>	VOCA CLINICAL COORDINATOR *	\$38,048.32	\$38,048.32	100% *	.63
<b>Personnel Narrative:</b>	* Functions as a member of a multidisciplinary team to provide services to victims of child abuse, neglect, and their families.				
<b>Sub-Total</b>		\$38,048.32	\$38,048.32		.63

**Agency Contribution for Personnel Expenses**

\$0.00

**Pay Schedule: (choose one from the drop-down menu)**

Bi-Weekly \*

**Position Number:**

6

Hours per week =

25.000 \*

Hourly Rate =

\$21.58 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$28,054.00		\$28,054.00	\$1,079.00
<b>FICA</b>		6.9000% *	\$1,935.73	\$74.45

<b>Retirement</b>		7.8000% *	\$2,188.21	\$84.16
<b>Health Ins.</b>			\$0.00 *	\$0.00
<b>Life Ins.</b>			\$0.00 *	\$0.00
<b>Dental Ins.</b>			\$0.00 *	\$0.00
<b>Workers Comp</b>		.7000% *	\$196.38	\$7.55
<b>Unemployment (1st \$7K)</b>		.1000% *	\$7.00	\$.27
<b>Other:</b>			\$5,667.00	\$217.96
<b>TOTAL</b>			<b>\$38,048.32</b>	<b>\$1,463.39</b>

Explanation (if applicable):

*FBP fringe rate components employer cost also includes other cost other disability, leave cash out shortfall/overage prior years.*

Is this position used as a matching expense Y/N?

No \*



# VOCA Personnel Budget

[VOCA Personnel Budget Report](#)

**Agency Name:** University of Florida Board of Trustees

Complete the summary table and salary grid below and provide information about each position requested. The position title included in each summary table must be exactly as it appears on the job description. In the Budget Narrative section indicate if the salary/benefit expenses listed include raises and increases in benefit costs, as well as any other information needed to support the request.

Provide a job description for all proposed VOCA-funded staff and indicate the percentage of time by each job duty (do not lump duties under one header, unless each sub-duty also includes percentages). Failure to provide VOCA allowable job descriptions may result in a reduction to the request. The job description must reflect VOCA allowable activities that are equal to or greater than the percentage of the position that is requested as VOCA funded and/or utilized as Match.

RATE: A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b>	CLINICAL COORDINATOR 3 *	\$83,300.74	\$20,825.19	25% *	.25
<b>Personnel Narrative:</b>	* Functions as a member of a multidisciplinary team to provide services to victims of child abuse, neglect, and their families.				
<b>Sub-Total</b>		\$83,300.74	\$20,825.19		.25

**Agency Contribution for Personnel Expenses**

\$62,475.55

**Pay Schedule: (choose one from the drop-down menu)**

Bi-Weekly \*

**Position Number:**

7

Hours per week =

40.000 \*

Hourly Rate =

\$29.27 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$60,881.60		\$60,881.60	\$2,341.60
<b>FICA</b>		6.9000% *	\$4,200.83	\$161.57

<b>Retirement</b>		7.8000% *	\$4,748.76	\$182.64
<b>Health Ins.</b>			\$736.59 *	\$28.33
<b>Life Ins.</b>			\$1.79 *	\$.07
<b>Dental Ins.</b>			\$0.00 *	\$0.00
<b>Workers Comp</b>		.7000% *	\$426.17	\$16.39
<b>Unemployment (1st \$7K)</b>		.1000% *	\$7.00	\$.27
<b>Other:</b>			\$12,298.00	\$473.00
<b>TOTAL</b>			<b>\$83,300.74</b>	<b>\$3,203.87</b>

Explanation (if applicable):

*FBP fringe rate components employer cost also includes other cost other disability, leave cash out shortfall/overage prior years.*

Is this position used as a matching expense Y/N?

No \*

# VOCA Personnel Budget

[VOCA Personnel Budget Report](#)

**Agency Name:** University of Florida Board of Trustees

Complete the summary table and salary grid below and provide information about each position requested. The position title included in each summary table must be exactly as it appears on the job description. In the Budget Narrative section indicate if the salary/benefit expenses listed include raises and increases in benefit costs, as well as any other information needed to support the request.

Provide a job description for all proposed VOCA-funded staff and indicate the percentage of time by each job duty (do not lump duties under one header, unless each sub-duty also includes percentages). Failure to provide VOCA allowable job descriptions may result in a reduction to the request. The job description must reflect VOCA allowable activities that are equal to or greater than the percentage of the position that is requested as VOCA funded and/or utilized as Match.

RATE: A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b>	CLINICAL COORDINATOR 3 *	\$82,564.24	\$20,641.06	25% *	.25
<b>Personnel Narrative:</b>	* Functions as a member of a multidisciplinary team to provide services to victims of child abuse, neglect, and their families.				
<b>Sub-Total</b>		\$82,564.24	\$20,641.06		.25

**Agency Contribution for Personnel Expenses**

\$61,923.18

**Pay Schedule: (choose one from the drop-down menu)**

Bi-Weekly \*

**Position Number:**

8

Hours per week =

40.000 \*

Hourly Rate =

\$29.27 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$60,881.60		\$60,881.60	\$2,341.60
<b>FICA</b>		6.9000% *	\$4,200.83	\$161.57

<b>Retirement</b>		7.8000% *	\$4,748.76	\$182.64
<b>Health Ins.</b>			\$0.00 *	\$0.00
<b>Life Ins.</b>			\$1.79 *	\$0.07
<b>Dental Ins.</b>			\$0.00 *	\$0.00
<b>Workers Comp</b>		.7000% *	\$426.17	\$16.39
<b>Unemployment (1st \$7K)</b>		.1000% *	\$7.00	\$0.27
<b>Other:</b>			\$12,298.09	\$473.00
<b>TOTAL</b>			<b>\$82,564.24</b>	<b>\$3,175.54</b>

Explanation (if applicable):

*FBP fringe rate components employer cost also includes other cost other disability, leave cash out shortfall/overage prior years.*

Is this position used as a matching expense Y/N?

No \*

# VOCA Personnel Budget

[VOCA Personnel Budget Report](#)

**Agency Name:** University of Florida Board of Trustees

Complete the summary table and salary grid below and provide information about each position requested. The position title included in each summary table must be exactly as it appears on the job description. In the Budget Narrative section indicate if the salary/benefit expenses listed include raises and increases in benefit costs, as well as any other information needed to support the request.

Provide a job description for all proposed VOCA-funded staff and indicate the percentage of time by each job duty (do not lump duties under one header, unless each sub-duty also includes percentages). Failure to provide VOCA allowable job descriptions may result in a reduction to the request. The job description must reflect VOCA allowable activities that are equal to or greater than the percentage of the position that is requested as VOCA funded and/or utilized as Match.

RATE: A percentage should be indicated for those benefits that are calculated by using a percentage of the gross salary, e.g., retirement is often calculated in this manner.

**Personnel:**

		Total Actual Cost (from chart below)	Total Amount VOCA Funded	Percent VOCA Funded	VOCA Funded FTE
<b>Position:</b>	CLINICAL CASE COORDINATOR *	\$69,847.22	\$17,461.81	25% *	.25
<b>Personnel Narrative:</b>	* Functions as a member of a multidisciplinary team to provide services to victims of child abuse, neglect, and their families.				
<b>Sub-Total</b>		\$69,847.22	\$17,461.81		.25

**Agency Contribution for Personnel Expenses**

\$52,385.41

**Pay Schedule: (choose one from the drop-down menu)**

Bi-Weekly \*

**Position Number:**

9

Hours per week =

40.000 \*

Hourly Rate =

\$24.50 \*

		RATE	Yearly Employer Cost	Per Pay Period Approved Budget
<b>Gross Salary</b>	\$50,960.00		\$50,960.00	\$1,960.00
<b>FICA</b>		6.9000% *	\$3,516.24	\$135.24

<b>Retirement</b>		7.8000% *	\$3,974.88	\$152.88
<b>Health Ins.</b>			\$736.59 *	\$28.33
<b>Life Ins.</b>			\$1.79 *	\$.07
<b>Dental Ins.</b>			\$0.00 *	\$0.00
<b>Workers Comp</b>		.7000% *	\$356.72	\$13.72
<b>Unemployment (1st \$7K)</b>		.1000% *	\$7.00	\$.27
<b>Other:</b>			\$10,294.00	\$395.92
<b>TOTAL</b>			<b>\$69,847.22</b>	<b>\$2,686.43</b>

Explanation (if applicable):

- FBP fringe rate components employer cost also includes other cost other disability, leave cash out shortfall/overage prior years.

Is this position used as a matching expense Y/N?

No \*

# VOCA Contractual/Fee for Service Budget

**Agency name:** *University of Florida Board of Trustees*

For each contractual service listed, include a description of the service to be provided, the business name of the contractor, the cost per unit of service, and the estimated units of service to be used. Indicate in the narrative section how the number of services requested was determined. Also, give a description of a unit of service, e.g., a 60 minute unit of legal services, a 60 minute individual therapy session, and a 90 minute group therapy session.

Therapy must be requested at the contracted therapist's per unit rate. The OAG will reimburse a maximum of the following rates, per 15 minute increment/unit.

Individual Therapy- \$25 per unit

Family Therapy- \$12.25 per unit/per person

Group Therapy- \$8 per unit/per person

EXAMPLE - Budget Narrative:

Therapy, Inc., will provide therapy for adult survivors of incest. It is anticipated that this service will be used approximately 10 times during the year.

## Contractual Services - Contracts for specialized services:

Name of Business or Contractor / Budget Narrative		Cost Per Unit of Service	Estimated Units of Service	Total
<b>Name of Business or Contractor:</b> <i>Individual Therapy</i>	<b>Budget Narrative:</b> <i>Individual Therapy \$25.00 per unit @ 60 minutes per unit. One on one client therapy. 3857 units Please see notes for names.</i>	\$25.00	3,857	\$96,425.00
<b>Name of Business or Contractor:</b> <i>Family Therapy</i>	<b>Budget Narrative:</b> <i>Family Therapy \$12.25 per unit 15 minutes per unit @30 per person, family member /NOC session together in a therapeutic group setting/ wvictim to address family dynamics. 35 units Please see notes for names.</i>	\$12.25	35	\$428.75
<b>Name of Business or Contractor:</b> <i>Group Therapy</i>	<b>Budget Narrative:</b> <i>Group Therapy \$8.00 per unit @15 minutes per person 3 or more with similar therapeutic needs in a group setting lead by a therapist 15 unit. please see notes for names.</i>	\$8.00	15	\$120.00

<b>Name of Business or Contractor:</b> <i>In-dept Assessment</i>	<b>Budget Narrative:</b> <i>Also known as the psychosocial evaluation that derives from the intake interviews with the principle therapy participants. Involves in-depth separate interviews with the Non-offending Caretaker and the victim. \$125 per unit @ 60 min 125 units.</i>	\$125.00	100	\$12,500.00
<b>Name of Business or Contractor:</b> <i>Standardized Assessment Tools</i>	<b>Budget Narrative:</b> <i>Used to evaluate for the enhancement of the clients quality of life. 25.00 per unit @ 80 units see notes for names.</i>	\$25.00	80	\$2,000.00
<b>Name of Business or Contractor:</b> <i>Treatment Plan</i>	<b>Budget Narrative:</b> <i>Developed plan that describes the clients conditions and procedures that are needed, detailing the treatment 160 units @ 97.00 per unit.</i>	\$97.00	65	\$6,305.00
<b>Name of Business or Contractor:</b> <i>Treatment Plan Review</i>	<b>Budget Narrative:</b> <i>Reviewif the developed plan that describes the clients condition and procedures that are needed, detailing the treatment 160 units @ 48.50.</i>	\$48.50	160	\$7,760.00
<b>Name of Business or Contractor:</b> <i>Case Management</i>	<b>Budget Narrative:</b> <i>Any clinical activity conducted outside of a formal therapy session in which communication occurs that is directed at the some case. This may be phone conversations with parents, teachers, attorneys, or other professionals. 10.00 per unit @ 1000.</i>	\$10.00	900	\$9,000.00
<b>Contractual Subtotal</b>				<b>\$134,538.75</b>



# VOCA Operating Budget

**Agency name:** *University of Florida Board of Trustees*

Office supplies such as paper, pencils, toner, printing, books, postage; transportation for victims; monthly service costs for telephone or utilities; staff travel (for direct service to crime victims or meeting attendance to coordinate victim services), etc. Furniture and equipment costing less than \$2,500 should be requested from this budget category. Items requested should not be grouped and each item must be requested as a separate line item, with the exception of general office supplies. In the narrative section, provide a brief description of the operating expenses and note if the cost is pro-rated. Indicate how the number and cost of services requested were determined (by FTE; by % use; by sq/ft; etc.). If the agency is requesting funds to purchase computer hardware or software, this constitutes maintaining or establishing a computer network system. Complete the Special Conditions Certification form accordingly.

**EXAMPLE- Narrative Response:**

The Victim Advocate will need monthly telephone service calculated at \$20 per month, which is the standard rate budgeted for new positions in this agency.

<b>Operating:</b>		<b>Number</b>	<b>Cost Per Item</b>	<b>Total</b>
Description of Operating Cost and a Budget Narrative				
Description of Operating Cost: <i>MIDTOWN CENTRE LEASE 4539 and 4505 BEACH BLVD</i>	Budget Narrative: <i>office space. Leases to be provided and reimbursement will be requested at a prorated amount based on VOCA FTEs.</i>	<i>1</i>	<i>\$102,850.00</i>	<i>\$102,850.00</i>
Description of Operating Cost: <i>COVID Expenses</i>	Budget Narrative: <i>Covid related expenses</i>	<i>1</i>	<i>\$10,000.00</i>	<i>\$10,000.00</i>
			<b>Operating Subtotal</b>	<b>\$112,850.00</b>

# Victims Served and Types of Services

**Agency Name:** *University of Florida Board of Trustees*

The number of victims indicated should include the number of new victims provided services by VOCA funded and matching staff during the grant period. The figures indicated should be based on historical data and/or the anticipated need of the population served through the VOCA project. If awarded funding, the applicant agency will be expected to fulfill these performance measures.

Recipients of VOCA funding are required to provide services to victims of Federal crimes and to provide assistance with the VOCA Crime Victim Compensation program.

VOCA Grant Request (from the Budget Summary Page)				\$691,234.67	
# of Victims to be Served	Type of Victim	\$ Amount per Category	% of Total Grant Amount	# of Other Types of Victims to be Served	For other types of crimes, identify and list each separately below.
0	Adult Physical Assault (Includes Aggravated and Simple Assault)	\$0.00	0.00 %	0	
0	Adult Sexual Assault	\$0.00	0.00 %	0	
0	Adults Sexually Abused/Assaulted as Children	\$0.00	0.00 %	0	
0	Arson	\$0.00	0.00 %	0	
5	Bullying (Verbal, Cyber or Physical)	\$4,476.91	.65 %	0	
0	Burglary	\$0.00	0.00 %	0	
120	Child Physical Abuse or Neglect	\$107,445.80	15.54 %	0	
15	Child Pornography	\$13,430.73	1.94 %	0	
570	Child Sexual Abuse/Assault	\$510,367.57	73.83 %	0	
25	Domestic and/or Family Violence	\$22,384.54	3.24 %	0	
0	DUI/DWI Incidents	\$0.00	0.00 %	0	
0	Elder Abuse or Neglect	\$0.00	0.00 %	0	
0	Hate Crime: Racial/Religious/Gender/Sexual Orientation/Other (Explanation Required)	\$0.00	0.00 %	0	
0	Human Trafficking: Labor	\$0.00	0.00 %	0	
25	Human Trafficking: Sex	\$22,384.54	3.24 %	0	
0	Identity Theft/Fraud/Financial Crime	\$0.00	0.00 %	0	
0	Kidnapping	\$0.00	0.00 %	0	
0	Mass Violence (Domestic/International)	\$0.00	0.00 %	0	
0	Other Vehicular Victimization (e.g., Hit and Run)	\$0.00	0.00 %	0	
0	Robbery	\$0.00	0.00 %	0	
0	Stalking/Harassment	\$0.00	0.00 %	0	

12	Survivors of Homicide Victims	\$10,744.58	1.55 %	0			
0	Teen Dating Victimization	\$0.00	0.00 %	0			
0	Terrorism (Domestic/International)	\$0.00	0.00 %	0			
<b>Total Victims Served</b>	<b>772</b>	<b>\$691,234.67</b>	<b>100.00 %</b>	<b>0</b>	<b>SubTotal</b>	<b>\$0.00</b>	<b>\$0.00</b>

Indicate the number of victims projected to receive the following services. In this section, only count a victim once, regardless of how many times the victim received a particular service. The total amount for any one service may not exceed the total number of victims projected to be served. See the VOCA Definitions for a description of each service.

# of Victims to be Served	Type of Service	# of Other Types of Services to be Provided	For other types of services, identify and list each separately below.
772	Information and Referral	0	
772	Personal Advocacy/Accompaniment	0	
772	Emotional Support or Safety Services	0	
0	Shelter/Housing Services	0	
772	Criminal/Civil Justice System Assistance	0	
772	Number of Victims Assisted with a Victim Compensation Application	0	
<b>Total Services</b>	<b>3,860</b>	<b>0</b>	<b>Subtotal of "Other" Services</b>