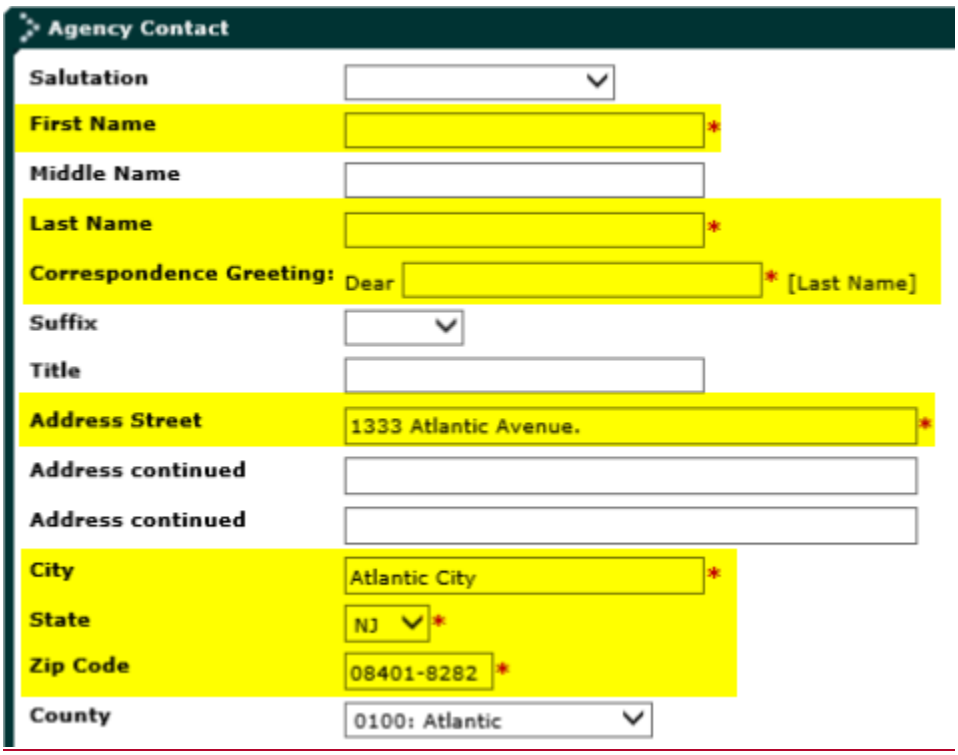
Non Competitive Award - Grantee Walkthrough

SAGE Access:

NJ currently has two Systems for Administrating Grants (SAGE). "Green" SAGE is maintained by Department of Community Affairs. Green SAGE manages all county and town organizations. "Blue" SAGE manages all other organizations. All members/staff of a county agency/municipality **must be** registered in Green SAGE. The registration information pushes to Blue SAGE. Please DO NOT register in Blue SAGE. The Authorized Official (AO) **must be** registered first in Green SAGE with assistance from NJDOL or DCA. If you are not registered in Green SAGE, please contact WDASage@dol.nj.gov. Please attached on letterhead the information highlighted below:



Agency Contact

Salutation	
First Name	*
Middle Name	
Last Name	*
Correspondence Greeting:	Dear * [Last Name]
Suffix	
Title	
Address Street	1333 Atlantic Avenue. *
Address continued	
Address continued	
City	Atlantic City *
State	NJ *
Zip Code	08401-8282 *
County	0100: Atlantic

ROLES in SAGE

Once the AO registration is approved, the AO can add staff to their organization. Below is a summary of the access allowed based on role.

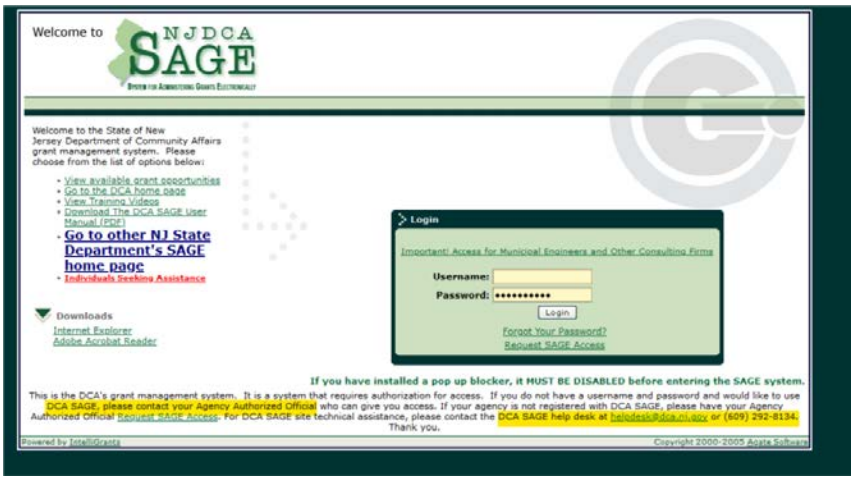
- Authorized Official Permissions
  - Add, change or delete
  - Add, change or delete Agency Contacts except another AO
  - Initiate forms

    - Submit Forms
    - Sign Contract
- Agency Administrator Permissions
    - Add, change or delete
    - Add, change or delete Agency Contacts except another AO
    - Initiate forms
    - Submit Forms
- Agency Staff Permissions
    - Data entry only

Reference guide for registering in Green SAGE:

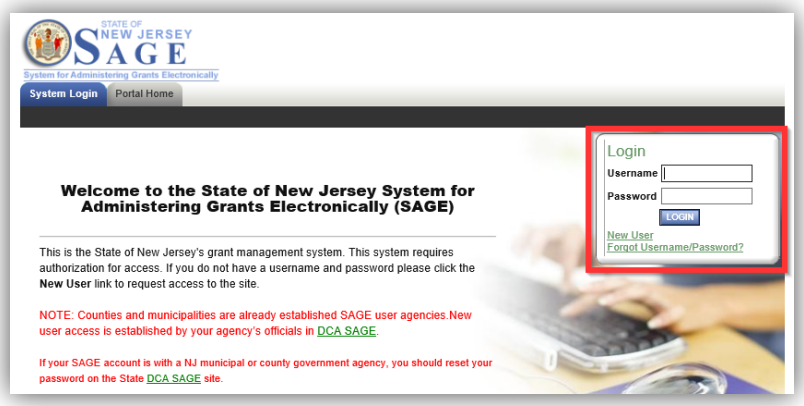
https://www.nj.gov/dca/pdfs/sageagencymanual.pdf

https://dcasage.intelligrants.com/Portal.asp



Non Competitive Grants

- Login with the username and password that was provided by NJDOL at the following URL: {https://njsage.intelligrants.com/Login2.aspx?APPTHEME=NJSAGE}



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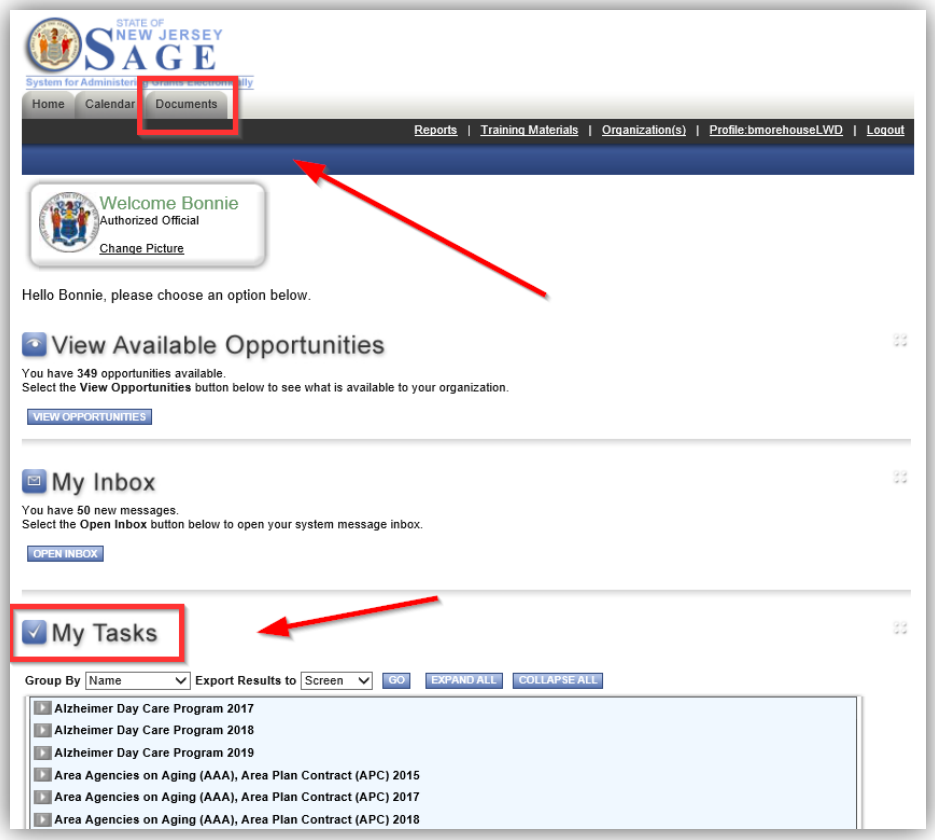
- Upon logging in, you will find your contract document in 1 of 2 places:
  - My Tasks on your Home page – Listed under Non Competitive Grant 2020
  - Documents Search Tab – search with the Non Competitive Grant document type



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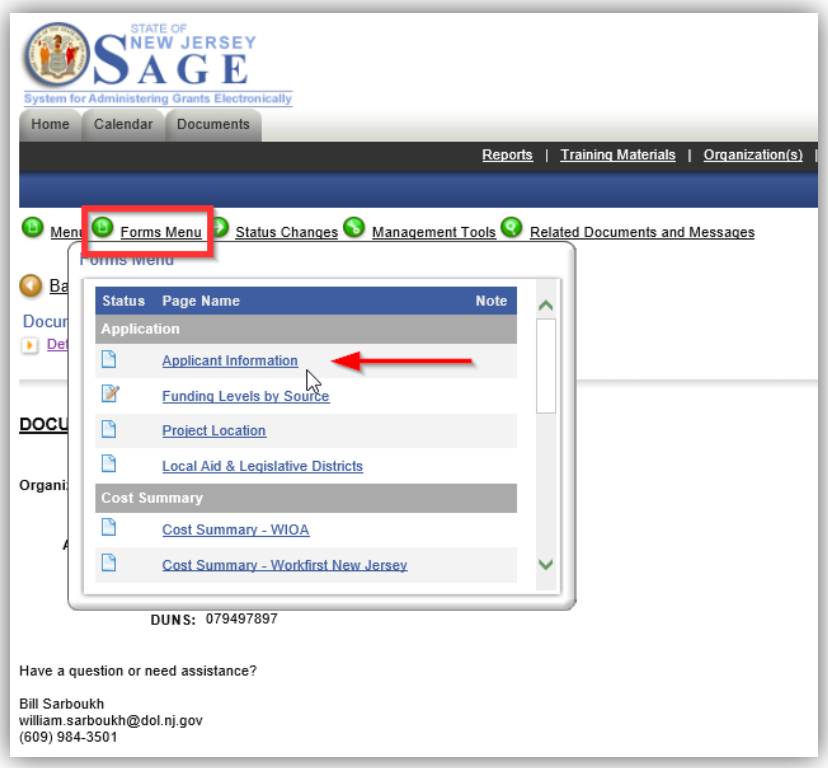
- Navigate to the first form in your Forms Menu dropdown: ***Applicant Information*** by hovering over the Forms Menu link.


STATE OF
NEW JERSEY
SAGE
System for Administering Grants Electronically
Home
Calendar
Documents
Reports | Training Materials | Organization(s) |
Forms Menu
Status Changes
Management Tools
Related Documents and Messages
Forms Menu
Status
Page Name
Note
Application
Applicant Information
Funding Levels by Source
Project Location
Local Aid & Legislative Districts
Cost Summary
Cost Summary - WIOA
Cost Summary - Workfirst New Jersey
DUNS: 079497897
Have a question or need assistance?
Bill Sarboukh
william.sarboukh@dol.nj.gov
(609) 984-3501

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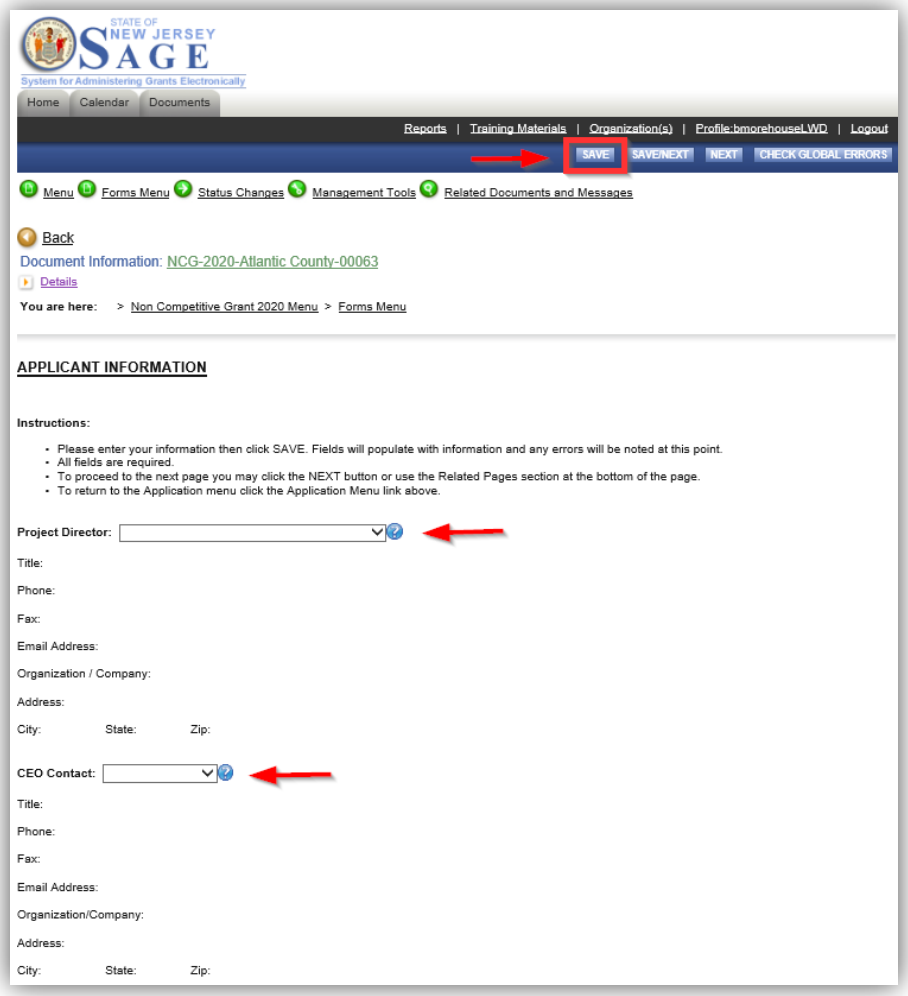
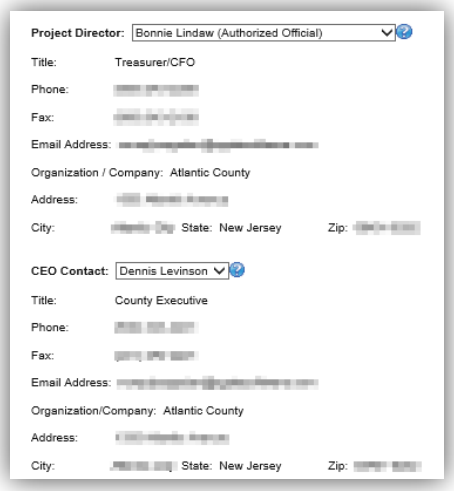
- Select the Project Director and CEO Contact for your organization and click Save.
  - The Project Director drop down is populated with the Agency Administrator and Authorized Officials from your organization, if none are listed, confirm your organization members have these roles.
  - The CEO Contact is a list of Authorized Officials in your organization, if this dropdown is empty, confirm your organization members has these roles assigned.

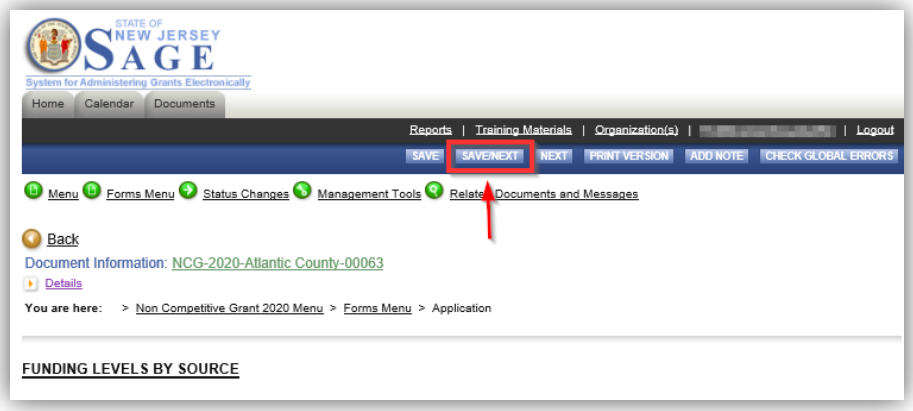


- Confirm the correct information is populated below each dropdown from the member's profile after you have saved your selections.

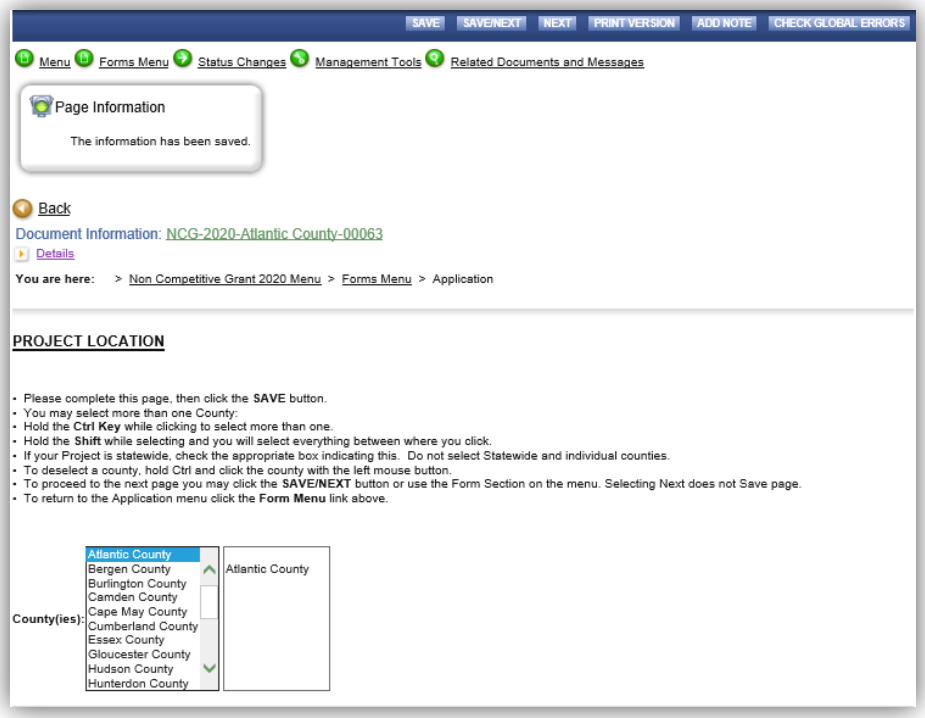


- Click NEXT to view the form: ***Funding Levels by Source***

-
- This form is to display the funding amounts awarded to this contract. The main purpose is informative, review and Save/Next.



- The next form you will see if the Project Location form. On this page, you will select the counties that your grant will serve. You can select one, or you may select multiple by holding the Ctrl key on your keyboard. Be sure to click Save to confirm your selection.



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- Click the NEXT button to navigate to the next form, called Local Aid and Legislative Districts. This form is just informational and based on the selections on the Project Location form. From here, you can click Save/Next to move on to the budget section of the contract.
- Fill in every Cost Summary available to you in the Forms Menu, you will only see Cost Summary forms for Funding streams you are awarded from.
  - Error checks on the Cost Summaries will prevent you from budgeting funds in categories that are outside of what was established on your Funding Levels by Source form.
- WIOA Cost Summary

Cost Category	WIOA							Grant Funds Requested
	Adult		Dislocated Worker		Youth			
	Program	Admin	Program	Admin	Program-In School	Program-Out of School	Admin	
A. Personnel Cost	$0	$0	$0	$0	$0	$0	$0	$0
Salaries / Wages	$0	$0	$0	$0	$0	$0	$0	$0
Fringe Benefits	$0	$0	$0	$0	$0	$0	$0	$0
B. Non-Personnel Costs	$0	$0	$0	$0	$0	$0	$0	$0
Occupancy Cost	$0	$0	$0	$0	$0	$0	$0	$0
Travel	$0	$0	$0	$0	$0	$0	$0	$0
Conference & Training	$0	$0	$0	$0	$0	$0	$0	$0
Other	$0	$0	$0	$0	$0	$0	$0	$0
C. Participant Services	$0		$0		$0	$0		$0
Training Contracts	$0		$0					$0
Work-based Training	$0		$0					$0
Pay for Performance (PfP)	$0		$0		$0	$0		$0
Supportive Services	$0		$0		$0	$0		$0
Contracted Services					$0	$0		$0
Total Cost	$0	$0	$0	$0	$0	$0	$0	$0

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Youth Work Experience	$0	$0

- If WIOA Youth funds are awarded, there is a minimum of 75% of the total grant funds dedicated to Youth-Out of School costs and a minimum of 20% of the total grant funds dedicated to Youth-Work Experience costs.
- Fill in the all of the textboxes where the funding applies to you. Note that if the funding is not established on this form, then it will not be available for you to justify expenses on your expenditure report.

- Workfirst New Jersey Cost Summary

Cost Category	Workfirst New Jersey						Grant Funds Requested
	TANF		GA/SNAP		SNAP Only		
	Program	Admin	Program	Admin	Program	Admin	
A. Personnel Cost		**$0**		**$0**		**$0**	**$0**
Salaries/Wages		$0		$0		$0	$0
Fringe Benefits		$0		$0		$0	$0
B. Non-Personnel Costs		**$0**		**$0**		**$0**	**$0**
Conference & Training		$0		$0		$0	$0
Occupancy Cost		$0		$0		$0	$0
Travel		$0		$0		$0	$0
Other		$0		$0		$0	$0
C. Subsidized Employment	**$0**		**$0**		**$0**		**$0**
Staff Costs	$0		$0		$0		$0
Participant Costs	$0		$0		$0		$0
D. Education and Training	**$0**		**$0**		**$0**		**$0**
Staff Costs	$0		$0		$0		$0
Participant Costs	$0		$0		$0		$0
E. Other Work Activities	**$0**		**$0**		**$0**		**$0**
Staff Costs	$0		$0		$0		$0
Participant Costs	$0		$0		$0		$0
F. CAVP	**$0**	**$0**					**$0**
Staff Costs	$0	$0					$0
Participant Costs	$0	$0					$0
G. Case Management	**$0**	**$0**	**$0**	**$0**	**$0**	**$0**	**$0**
Case Management	$0	$0	$0	$0	$0	$0	$0
H. Other TANF/GA/SNAP Programs	**$0**		**$0**		**$0**		**$0**
Work Verification	$0						$0
On the Job Training	$0		$0		$0		$0
Needs Based Work Support	$0		$0		$0		$0
Total Cost	$0	$0	$0	$0	$0	$0	**$0**

- Fill in the all of the textboxes where the funding applies to you. Note that if the funding is not established on this form, then it will not be available for you to justify expenses on your expenditure report.
- TANF funds cannot exceed 12% of Workfirst funds.
- CAVP, GA/SNAP, SNAP only admin costs cannot exceed 12% of the total grant funds.

- Workforce Learning Link Cost Summary

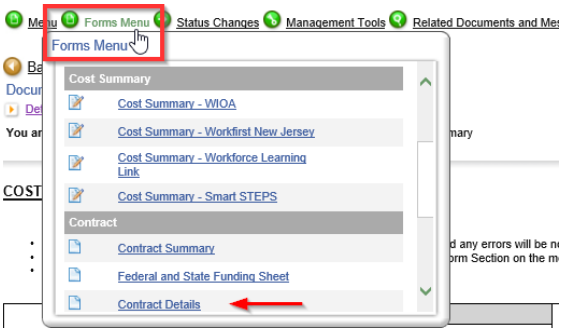
Cost Category	Workforce Learning Link		Grant Funds
	Program	Admin	
A. Personnel Cost	**$0**	**$0**	**$0**
Salaries/Wages	$0	$0	$0
Fringe Benefits	$0	$0	$0
B. Non-Personnel Costs	**$0**	**$0**	**$0**
Conference & Training	$0	$0	$0
Occupancy Cost	$0	$0	$0
Travel	$0	$0	$0
Other	$0	$0	$0
C. Participant Costs	**$0**		**$0**
Contracted Services	$0		$0
Other	$0		$0
Total Cost	**$0**	**$0**	**$0**

- Fill in the all of the textboxes where the funding applies to you. Note that if the funding is not established on this form, then it will not be available for you to justify expenses on your expenditure report.
- Total Admin Costs cannot exceed 7% of the total grant funds.

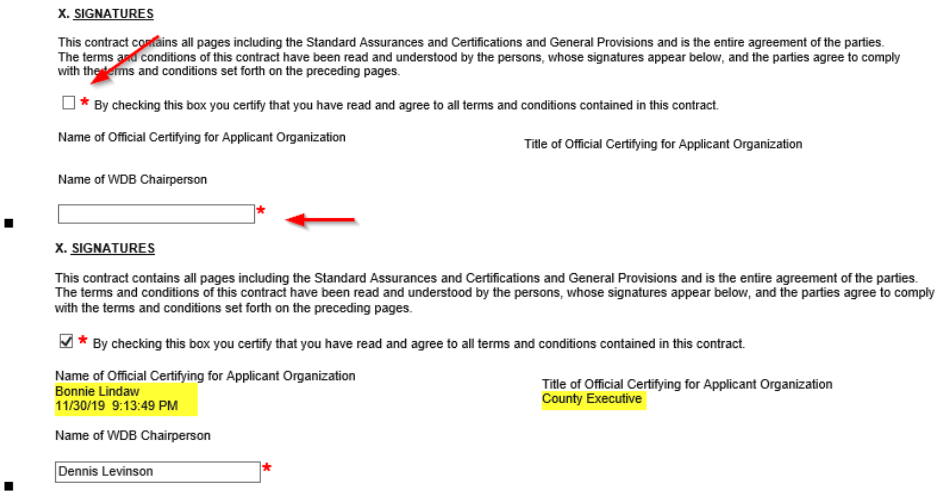
- Smart STEPS Cost Summary

Cost Category	Smart STEPS		Grant Funds
	Program	Admin	
A. Personnel Cost	**$0**	**$0**	**$0**
Salaries/Wages	$0	$0	$0
Fringe Benefits	$0	$0	$0
B. Non-Personnel Costs	**$0**	**$0**	**$0**
Conference & Training	$0	$0	$0
Occupancy Cost	$0	$0	$0
Travel	$0	$0	$0
Other	$0	$0	$0
C. Participant Costs	**$0**		**$0**
Contracted Services	$0		$0
Other	$0		$0
Total Cost	**$0**	**$0**	**$0**

  - Fill in the all of the textboxes where the funding applies to you. Note that if the funding is not established on this form, then it will not be available for you to justify expenses on your expenditure report.
  - Total Admin Costs cannot exceed 7% of the total grant funds.
- At this point, you will move on to the Contract section of your grant. Click through to review:
  - Contract Summary – to give a summary of award funds, contract term dates, and vendor information.
  - Standard Assurances and Certifications
  - General Provisions
  - Contract Details*
  - Vendor Information
- You are required to sign the Contract Details for each type of funding you are awarded from.
- To sign the Contract Details:
  - Navigate to the form either via the Next button or the hover over menu.



  - To sign the Contract, the CEO selected on the Applicant Information page needs to check the certification checkbox and enter the name of the Workforce Development Board Chairperson. Only the CEO selected on Applicant Information will be able to get a signature stamped on this form, the name, title and a date stamp will populate automatically upon save.



X. SIGNATURES

This contract contains all pages including the Standard Assurances and Certifications and General Provisions and is the entire agreement of the parties. The terms and conditions of this contract have been read and understood by the persons, whose signatures appear below, and the parties agree to comply with the terms and conditions set forth on the preceding pages.

☐ * By checking this box you certify that you have read and agree to all terms and conditions contained in this contract.

Name of Official Certifying for Applicant Organization

Title of Official Certifying for Applicant Organization

Name of WDB Chairperson

*

X. SIGNATURES

This contract contains all pages including the Standard Assurances and Certifications and General Provisions and is the entire agreement of the parties. The terms and conditions of this contract have been read and understood by the persons, whose signatures appear below, and the parties agree to comply with the terms and conditions set forth on the preceding pages.

☑ * By checking this box you certify that you have read and agree to all terms and conditions contained in this contract.

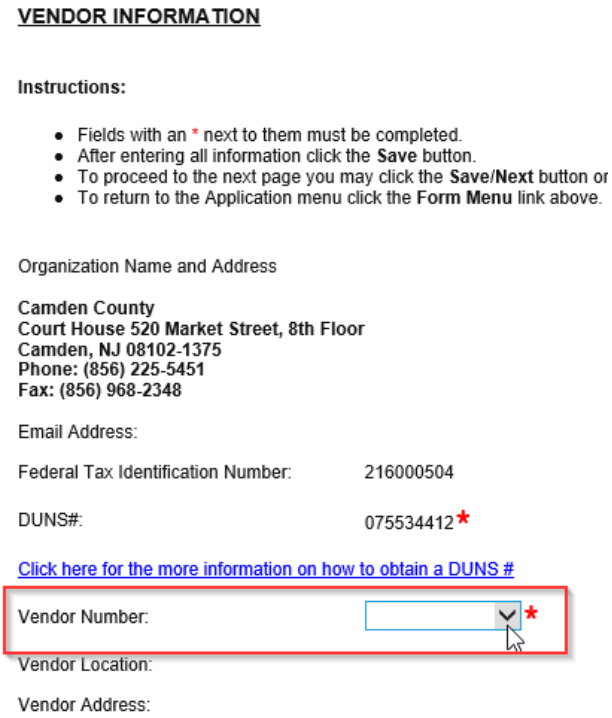
Name of Official Certifying for Applicant Organization
Bonnie Lindaw
11/30/19 9:13:49 PM

Title of Official Certifying for Applicant Organization
County Executive

Name of WDB Chairperson

Dennis Levinson *

- Standard Assurances and Certifications and the General Provisions will also be signed by checking the box at the bottom of the page and saving. The system will stamp the Authorized Official's Name and Title when the page is saved by an Authorized Official only.
- Then you will need to address the Vendor Information form. This page is where you select the vendor location code to which the system should associate the grant to in CFS.



VENDOR INFORMATION

Instructions:

- Fields with an * next to them must be completed.
- After entering all information click the **Save** button.
- To proceed to the next page you may click the **Save/Next** button or
- To return to the Application menu click the **Form Menu** link above.

Organization Name and Address

Camden County
Court House 520 Market Street, 8th Floor
Camden, NJ 08102-1375
Phone: (856) 225-5451
Fax: (856) 968-2348

Email Address:

Federal Tax Identification Number: 216000504

DUNS#: 075534412 *

Click here for the more information on how to obtain a DUNS #

Vendor Number: *

Vendor Location:

Vendor Address:

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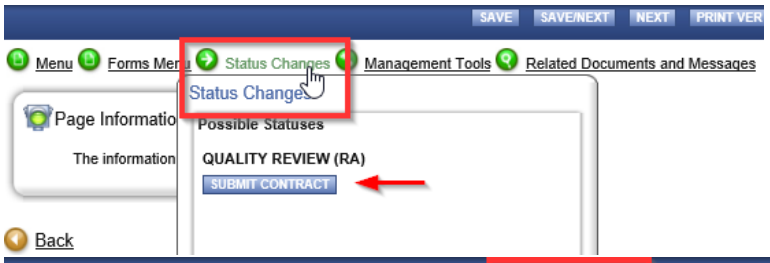
- At this point you are ready to submit your contract to NJDOL for review. You can do this via the hover over menu for Status Changes at the top of the document or via the SAVE & SUBMIT button at the end of the contract, on the Vendor Information form. Note: Only the Authorized Official or CEO can change the status to submit the contract. Once you click to Submit, NJDOL will review your Contract for approval.

- 

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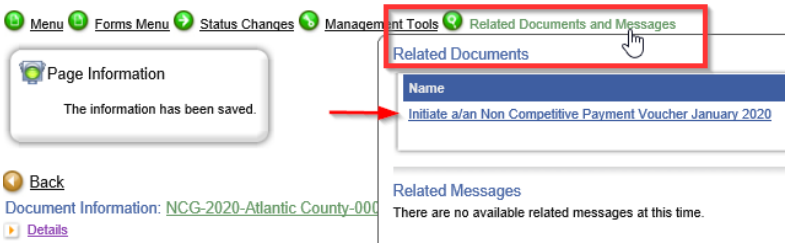
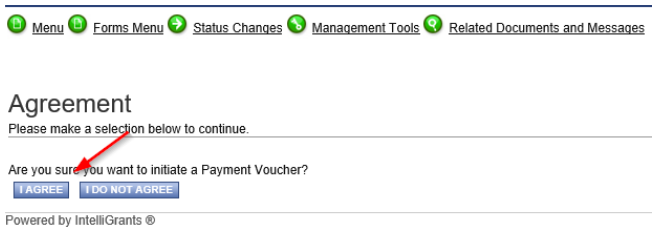
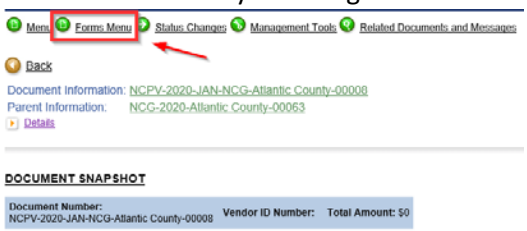
PAYMENTS

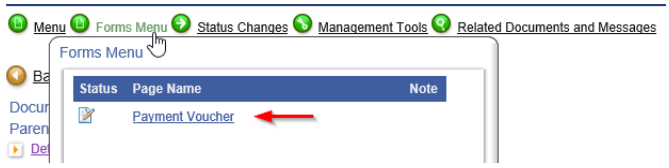
Grantees can request payments at any point once a grant is awarded and reaches the status of Contract Negotiations.

To initiate a payment voucher, hover over the menu at the top of your document called Related Documents and Messages.

- 

- Click on the link "Initiate a/an Non Competitive Payment Voucher…" and the system will bring you to an agreement page where you must click "I Agree" to create a payment voucher document.
- 

- The system will navigate you to the Payment Voucher Document Menu, from here you can access your voucher form by hovering over the Forms Menu link:
- 

- 

- Fill in the voucher with the funding required from each funding stream that you want to request funds from, and check the payee declarations checkboxes to certify the form.

WIOA		WFNJ		Learning Link	SmartSTEPS
Adult	$0	TANF	$0	$0	$0
Dislocated Worker	$0	GA/SNAP	$0		
Youth	$0	SNAP Only	$0		
Total:	$0		$0	$0	$0

Payee Declarations

☐ * By checking this box, you certify that the within Payment Voucher is correct in all its particulars, that the described goods or services have been furnished or rendered and that no bonus has been given or received on account of said document.

☐ * By checking this box, I agree that the cash drawdown request does not exceed our cumulative cash disbursements.

- You should enter amounts according to the accounts, this means filling out a row in each section for the following amounts:
  - WIOA (all together)
  - TANF
  - GA/SNAP
  - SNAP Only
  - Workforce Learning Link
  - And Smart STEPS
  - These amounts entered will calculate into a total below it, these totals need to match the total amount calculated in the first section in order to submit, otherwise you will encounter an error check that will prevent you from submitting.

WIOA		WFNJ		Learning Link	SmartSTEPS
Adult	$0	TANF	$0	$0	$0
Dislocated Worker	$0	GA/SNAP	$0		
Youth	$0	SNAP Only	$0		
Total:	$0		$0	$0	$0

Total Amount

$0

Payee Declarations

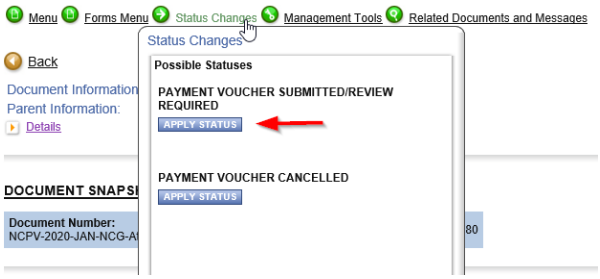
☐ * By checking this box, you certify that the within Payment Voucher is correct in all its particulars, that the described goods or services have been furnished or rendered and that no bonus has been given or received on account of said document.

☐ * By checking this box, I agree that the cash drawdown request does not exceed our cumulative cash disbursements.

REFERENCE			LINE	PAYEE REFERENCE	Payment Period	AMOUNT
CD	AGY	NUMBER				
AO	062			NCPV-2021-JUL-NCG-Camden County-00034	July, 2021	$0
AO	062			NCPV-2021-JUL-NCG-Camden County-00034	July, 2021	$0
AO	062			NCPV-2021-JUL-NCG-Camden County-00034	July, 2021	$0
AO	062			NCPV-2021-JUL-NCG-Camden County-00034	July, 2021	$0
AO	062			NCPV-2021-JUL-NCG-Camden County-00034	July, 2021	$0
AO	062			NCPV-2021-JUL-NCG-Camden County-00034	July, 2021	$0
					TOTAL:	$0

DESCRIPTION OF ITEM	AMOUNT
0 of 200	$0
0 of 200	$0
0 of 200	$0
0 of 200	$0
0 of 200	$0
0 of 200	$0
TOTAL	$0

- Submit your voucher to NJDOL for review by changing the status via the status change menu or the Submit button on the voucher:

o 

- If you create a voucher on accident, you can also cancel your payment here by selecting Payment Voucher Cancelled.

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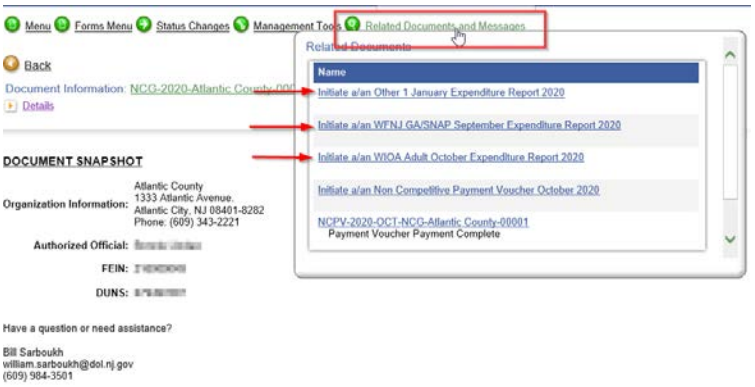
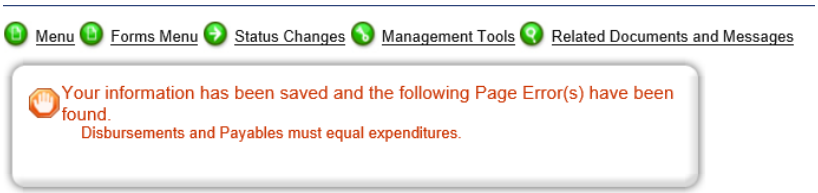
Expenditure Reports

Expenditure Reports can be initiated the same way as Payment Vouchers, from the Grant document. You will need to create an expenditure report once per month (per funding stream) to justify the funds requested and paid from the payment vouchers submitted in the month leading up to the Expenditure Report.

There will be a link to initiate an expenditure for each type of funding you have access to.

- 

When you are on an expenditure report for a funding type that you have drawn money on (in the month related to that expenditure), the amount paid is displayed on the expenditure form. Error checks will require the disbursements and payables to match, you will not be able to submit an expenditure report until it has been reconciled.

- 

Here is an example, you will need the Reconciliation section's values to match:

	Current Month	Contract To Date	Reconciliation	
Cash Disbursements:	$0	$8,000	Disbursements and Payables:	$8,000
Cash Draws:	$2,500	$0	Expenditures:	$8,320
Cash On Hand:	$0	($8,000)		
Accounts Payable:	$0			
Program Income Earned:	$0	$0		
Program Income Expended:	$0	$0		

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Here is an example of where you can find the amount of cash you have drawn:

REPORT OF GRANT EXPENDITURES

Instructions:

- For any explanation of expenditures, must add a note with the Cost Category being added as the line item and a description detailing the expenditure issue for that month.

Reporting Period: February **Amount Paid:** $2,500

Cost Category	WFNJ TANF - Program				
	Approved Budget	Expenditures	Cumulative Expenditures	Unliquidated Obligations	Remaining Budget
Subsidized Employment	$0	$0	$0	$0	$0
Staff Costs	$0	$0	$0	$0	$0
Participants Costs	$0	$0	$0	$0	$0

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- Multiple vouchers can be submitted within the month leading up to the Expenditure Report. However, if a Voucher is not paid and complete by the 26th of the month, then it will not be included in that month's expenditure report.