**Cover Page**



Maryland Department of Human Services, Family Investment Administration

Supplemental Nutrition Assistance Program Employment & Training

(MD SNAP E&T)

FFY 26-28 Proposal

Award Duration Period: October 1, 2025 - September 30, 2028

****

**SECTION I: APPLICANT PROFILE**

1. Full Organization Name / DBA:
2. Date Proposal Submitted:
3. Contact Person:
	* Name
	* Phone
	* Address
	* Email
4. Program Point of Contact:
	* Name
	* Phone
	* Address
	* Email
5. Authorized Signatory:
	* Name
	* Phone
	* Address
	* Email
6. DUNS Number:
7. UEI Number (SAMS):
8. Federal Tax ID Number:
9. Mailing Address:
10. Physical Address(es):
11. Business/Invoice Address:
12. Telephone Number:
13. Fax Number:
14. Website:
15. Counties/Locations Served:
16. W-9 Taxpayer Identification Number (TIN):
17. Program Totals

| **Fiscal Year Totals** | Administrative Reimbursement Amount | Participant Reimbursement Amount | Total Allocation for the SNAP E&T Program |
| --- | --- | --- | --- |
| FFY 2026 |  |  |  |
| FFY 2027 |  |  |  |
| FFY 2028 |  |  |  |
| **Three-Year Total** |  |  |  |

*Example: FFY 2026*

*Administrative Reimbursement Cost: $6,000.00*

*Participant Reimbursement Cost: $4,000.00*

*Total Allocation for the SNAP E&T Program: $10,000.00*

***Allowable Reimbursement Amount: $5,000.00***

*Note: This is a 50% reimbursement program for allowable costs associated with SNAP E&T participants only.*

**SECTION II: SNAP E&T PROPOSAL**

***Organizational Overview and Program Summary***

This section should provide a concise introduction to your organization, including your mission, history, and relevant areas of expertise. Clearly explain how participation in the SNAP Employment & Training (SNAP E&T) program aligns with your organization’s vision and strategic priorities. Prospective providers must highlight their experience delivering workforce development services, particularly those aimed at helping low-income individuals move toward economic self-sufficiency. Include examples of past or current programs that demonstrate your capacity to serve SNAP populations or similarly underserved groups.

You should also provide a summary of the proposed SNAP E&T project, including:

* The program’s primary goals and intended impact
* Key services and activities to be delivered
* How the program addresses the specific needs of SNAP E&T participants

Additionally, define the population your project will serve. Include information about participant demographics (e.g., age, employment status, barriers to employment) and, provide projected numbers of individuals to be enrolled and served.

Finally, highlight the specific outcomes your program aims to achieve, such as credential attainment, job placements, and employment retention milestones.

**Needs Statement**

Many SNAP participants encounter substantial barriers to employment, including limited educational attainment, inconsistent or limited work history, and challenges related to transportation, childcare, and access to career development resources. Certain subpopulations—such as individuals experiencing homelessness, justice-involved individuals, and English language learners—face even greater difficulties in securing and maintaining employment.

To effectively support these individuals, there is a critical need for holistic, participant-centered Employment and Training (E&T) services. These services must go beyond basic job readiness and vocational training to include wraparound supports such as individualized case management, career navigation, and referrals to supportive services. Programs should be aligned with local labor market needs and tailored to address the specific challenges faced by diverse SNAP populations.

The Department of Human Services (DHS) seeks proposals from qualified organizations with the capacity to deliver impactful, data-driven SNAP E&T services in accordance with federal and state guidelines.

In this section, prospective providers must demonstrate a comprehensive understanding of the SNAP participant population, supported by relevant data, research, and local context. Proposals must clearly identify the target population(s), outline the specific employment barriers the program intends to address, and define the anticipated outcomes. Organizations should also describe insights gained from previous experience, community engagement, and stakeholder collaboration that have informed their approach to meeting the identified needs.

The organizations must discuss whether they intend to provide services in one or more of the [27 ENOUGH communities](https://goc.maryland.gov/Pages/ENOUGH-Grantees.aspx) or other priority areas.

***Program Design Requirements***

In this section, prospective providers must present a comprehensive and clearly structured plan for implementing SNAP Employment and Training (E&T) services. The program design must demonstrate a thoughtful, participant-centered approach that aligns with SNAP E&T goals, meets the needs of the target population, and supports sustained employment outcomes.

Providers must include the following information:

Organizational Overview and Program Summary [Insert concise narrative covering mission, expertise, alignment with SNAP E&T, past experience, population served, goals, and outcomes.]

**Program Design Requirements**

Include the following subsections:

1. **Program Overview**
	* Provide a high-level summary of the proposed SNAP E&T program, including its goals, guiding principles, and the overall approach to service delivery.
2. **Outreach and Target Population Strategy**
	* Describe the strategy for identifying and engaging eligible SNAP participants.
	* Specify the target population(s) to be served (e.g., individuals with limited work history, English language learners, single parents, justice-involved individuals).
	* Detail how outreach will be tailored to reach underserved or hard-to-reach populations.
3. **Client Intake, Assessment, and Enrollment Process**
	* Outline the steps for assessing participant eligibility and suitability for services.
	* Describe the intake process, including initial assessments, and how participants are matched with appropriate program components.
	* Include how the Individual Employment Plan (IEP) will be used to guide enrollment and service planning.
4. **Detailed Description of SNAP E&T Components**
	* Provide a comprehensive description of each component the provider intends to offer (e.g., job readiness, vocational training, basic education, work-based learning, job search assistance).
	* Explain the objectives, structure, and expected outcomes of each component.
5. **Program Enrollment and Duration of Services**
	* Describe the enrollment process, criteria, and timing.
	* Indicate the expected duration of participation for each component and the program as a whole.
6. **Program Timeline and Workflow**
	* Present a timeline or visual workflow showing key stages of program delivery—from intake through program completion and follow-up.
	* Include anticipated participant milestones.
7. **Assessment of Participant Needs and Progress**
	* Explain how ongoing assessments will be conducted to evaluate participant progress toward goals.
	* Describe how IEPs will be updated based on participant development and needs.
8. **Suitability Screening for Component Participation**
	* Describe how participants will be assessed for readiness and suitability prior to placement in each specific E&T component.
	* Identify tools or criteria used to determine fit and support successful outcomes.
9. **Supportive and Wraparound Services**
	* Describe the type of wrap around services that your organization will provide to address participants’ barriers.
	* Discuss which organizations in your service area you will partner with to meet client needs (i.e. transportation, child care, food and financial resources, and any other service not provided in house).
	* Describe who will provide wrap around services, how often they will meet with clients to check on their progress toward meeting their goals and needs
10. **Performance Tracking and Evaluation**
	* Describe how the program will monitor, track, and evaluate performance outcomes, such as:
		+ Number of participants enrolled, completing components, obtaining credentials, and placed in employment
		+ Job retention at 90 days and one year
	* Specify the data management systems or tools used for tracking and reporting.
	* Describe how your organization will ensure that participants’s activities are reported in the WORKS system
11. **Labor Market Alignment**
	* Demonstrate how the program aligns with current regional or local labor market trends.
	* Identify priority industries or occupations and describe how services are tailored to those opportunities.
12. **Pathways to In-Demand Employment**
	* Provide evidence that training programs lead to industry-recognized credentials or employment in high-demand sectors.
	* Describe career pathway models or advancement opportunities incorporated into the program.
13. **Serving Special Populations**
	* Explain how the program will meet the unique needs of special populations, including:
		+ Individuals with Limited English Proficiency (LEP)
		+ Formerly incarcerated individuals
		+ Individuals with disabilities
		+ Single parents
		+ Youth aging out of foster care, and others
	* Include culturally responsive or trauma-informed practices, accessibility measures, and equity strategies.
14. **Staffing and Organizational Roles**
	* Identify each funded staff position involved in program implementation.
	* Describe the responsibilities and qualifications for each role, and how staffing supports successful program delivery, coordination, and compliance.
15. **Components Table- (**Estimated number of SNAP Customers only/Case Management is a mandatory component**)**

| ***Description of Services*** | ***FNS Component(s)*** | ***In-House or subcontracted*** | ***# of Proposed Participants in Component***  | ***Price Per Customer per Component*** | ***Estimated amount: component (estimated number of participants X Price Per Customer)*** |
| --- | --- | --- | --- | --- | --- |
| *CNA Certification- Licensure, training,*  | *BEV-Vocational Training* | *In-House* | *50* | *(EXAMPLE: total admin cost /total number of participants/number of components)**$100,000/500/5=$40* | *Price per component X # of participants in component ($40X50)=**$2,000.00* |
| Mandatory Component | Case Management |  | (All Customers) |  |  |
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1. **Building Space Costs (**If charging building space to the E&T program, describe the method used to calculate space value that is allocated to SNAP Customers/the SNAP E&T program**).**
	1. ***Example 1: Building Space 2500 sq ft / $60k per year***
	2. ***Example 2: Building Space 1700 sq ft/ $18,000 (2x-location 1, location 2)***
	3. ***Example 3: Building Space 43,450 sq ft at a rate of $2.53 per square foot equates to $110,000 annually. This includes rent, utilities, and maintenance expenses.***
2. **Participant Reimbursement Services Offered:** In your proposal, please provide the types of participant reimbursements that your organization will offer, your criteria for determining who needs the reimbursement, and the form in which the reimbursement will be issued. Please describe the process for referring customers to external resources for needs that you are unable to meet internally.

1. **Sub Contractors *(****list all sub contractors/outside vendors- info must be provided for each sub contractor***)**
	1. **Vendor Name**
		1. Vendor Contact Name
		2. Vendor Address
		3. Vendor Email Address
		4. Vendor Website
		5. Vendor SDAT
		6. Description of services provided by the vendor
		7. EIN
		8. Sub-contract amount
		9. Describe how you will ensure that the subcontractor fully understands SNAP E&T requirements.
		10. Describe your process for ensuring the subcontractor complies with SNAP E&T requirements and contractual obligations.
		11. Describe the cost per customer served
2. **Staff Profile: Using the table below, please provide information on all staff within your organization who will be involved with the SNAP E&T Program**

| **Staff Name**  | **Job Title** | **Role with SNAP E&T** | **Number of years in workforce development** | **Biography**  |
| --- | --- | --- | --- | --- |
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1. **Proposed Outcomes for 2026-2028 (**complete table**)**

| **Metric Goals** | **FFY 26 Target** | **FFY 27 Target** | **FFY 28 Target** |
| --- | --- | --- | --- |
| Number of participants to be enrolled  |  |  |  |
| Number of customers completing Component 1 |  |  |  |
| Number of customers completing Component 2 |  |  |  |
| Number of customers completing Component 3 |  |  |  |
| Number of customers earning a credential |  |  |  |
| Number of customers placed in jobs |  |  |  |
| Number of customers retaining employment 90 days after job placement |  |  |  |
| Number of customers retaining employment 1 year after job placement |  |  |  |
| **Total # of unduplicated customers that enter the program** |  |  |  |

**A**[**ttachments**](#_heading=h.1y810tw) **(All Required/Must be labelled)**

**Attachment A: Assessment Tool**

In-depth assessment of program participants is essential. Partners will provide a copy of their own assessment tool(s) to be reviewed and approved by DHS.

**Attachment B: Individualized Employment Plan (IEP)**

An IEP is a document that outlines the participant’s career goals, skills, abilities, family responsibilities, and any job-related assets or barriers. It should also detail the incremental steps that the provider and the SNAP E&T participant will take, individually or in collaboration, to overcome barriers to achieving economic self-sufficiency. Partners will provide a copy of their own IEP templates for SNAP E&T to be reviewed and approved by DHS.

**Attachments C: Program Budget and Budget Narrative**

An applicant must submit a detailed budget narrative and must provide a justification for each budget category. Administrative costs and participant reimbursements are listed separately on the budget sheet. The narrative should clearly explain how the applicant calculated the budget figures. Additionally, the budget must demonstrate the organization’s capability to operate under a 50/50 funding model. The applicant must be able to cover the full cost of the program on a monthly basis. Upon submission and review of invoices for allowable expenditures, the applicant will be reimbursed for 50% of the total allowable costs. Applicants should confirm to DHS that they have access to at least six months of operating capital to cover the costs for SNAP E&T participants..

**Administrative Expenses**

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### **Salaries and Wages**

Proposed salaries and wages for all staff assigned to the **SNAP E&T Program** should be listed, detailing compensation for each employee working on the project. This information is collected on the Attachment C included with this packet.

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### **Fringe Benefits**

Fringe benefits are additional allowances and services provided to employees, beyond their regular salaries and wages. These benefits may include, but are not limited to, employee insurance, unemployment benefits, and other compensatory benefits directly tied to the SNAP E&T Program. **Note:** This does not include FICA (Federal Insurance Contribution Act).

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### **Direct Costs**

Direct costs are those expenses that can be directly attributed to the SNAP E&T Program. These may include:

* Utilities
* Telephone services
* Maintenance services directly related to project activities
* Insurance, subscriptions, postage, and costs for the translation of language forms for accessibility to customers.

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### **Employee Travel**

Proposed expenditures for travel, including staff, consultant, and participant travel, should be outlined. This includes per diem and reimbursement policies. Travel expenses must be associated with **SNAP E&T events outside of the primary work location**. **Note:** Travel to and from the worksite is not an allowable expense.

### **Subcontractual Services**

Costs for companies or individuals hired by the Third-Party Partner to provide specific services for the SNAP E&T Program.

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### **Participant Reimbursement**

Reasonable and necessary expenses directly related to participation in the SNAP E&T Program may be reimbursed, including:

* Dependent care
* Transportation
* Training or education-related expenses, such as:
	+ Uniforms
	+ Personal safety items or other equipment
	+ Books and training manuals

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### **Reimbursement Stipulations**

**Participant Expenses**: Reimbursement for expenses that are reasonable and necessary to carry out an Employment and Training component, including:

* Tuition, course registration fees
* Books and testing fees
* Clothing, personal safety items, tools, or uniforms required for participation in SNAP E&T components or for job readiness
* Licensing and bonding fees for work experience programs
* Vision correction (e.g., eyeglasses, eye exams)
* Dental work (e.g., teeth cleaning)
* Legal services
* Case management services
* Dependent care
* Transportation to and from SNAP E&T components

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### **Unallowable Use of Funds**

Funds cannot be used for the following:

* **In-kind services**
* Funds already designated as a match for another federal program
* Services overcoming barriers to SNAP E&T participation that exempt individuals from Federal work registration (e.g., mental health, drug/alcohol treatment programs)
* Services, including tuition and academic fees, above what is charged to the public
* **Meals away from home**
* **Bonuses for staff**
* Purchase of **personal items**
* Bad debt expenses
* Political contributions
* Fines and penalties for failure to comply with laws
* Legislative expenses
* Losses not covered by insurance
* Cost of construction or purchase of facilities
* Sectarian worship or proselytization
* Refreshments, promotional items, and memorabilia
* Personal computers
* Living stipends
* Vehicle purchases
* Automobile insurance
* Student loans
* Relocation expenses
* Union dues

**Proposal Formatting**

### Prospective providers should adhere to the following formatting when preparing their proposals:

* **The maximum length for the entire proposal is** 15 **(**single-spaced pages/**not including attachments and appendices).**
* **Pages must be** 8½ by 11 inches **in size with** 1-inch margins**.**
* Font: **12-point, preferably** Montserrat**, with** 1.15 line spacing **(except for the cover page).**
* **All pages must be** numbered**.**
* **Attachment C must be submitted in** Excel format **(not PDF).**

Note: **Applicants may submit more or fewer pages than recommended for any section, but the total proposal cannot exceed 15 pages (excluding attachments and appendices).** Proposals that do not meet these requirements will not be accepted.

**Appendices (All Required/Must be labelled)**

Appendix I: W-9

Appendix II: DUNS Number

Appendix III: UEI - Unique Entity Identifier

Appendix IV: Indirect Cost over 10% Documentation (if applicable)

Appendix V: SNAP E&T Program Organizational chart for the project

Appendix VI: Position Descriptions, as applicable for the SNAP E&T Program only

Appendix VII: Assurances, (if applicable/if not please add page holder and write “Not Applicable”)

Appendix VIII: List of all Employment Partners/Resources for Job Placement Opportunities for SNAP Customers and Proposed job titles with proposal salary/pay scale for each position (Labor Market Data)

Appendix IX: For Returning Partners-Add your most recent Program Audit -[Copy of External Audit or statement from Certified Public Accountant assuring program’s financial soundness and appropriate internal controls(for new partners please put N/A)]

Appendix X: List of all non-federal funding sources including the following:

 Name of Source

 Percentage of total funds committed for SNAP E&T

Total amount to be assigned to the SNAP E&T Program for FFY’26

Appendix XI: Employer Letter of Support (2 minimum)

**Section III- Attestation and Signature**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have read and understand the proposal guidelines.

By Submitting this proposal, I attest to the following:

* 1. Your program has reviewed and understands the SNAP E&T Proposal Guidelines.
* 2. Your Program will not charge SNAP participants for any aspect of the program.
* 3. Your program will have the total amount of Non-Federal funding to support the program for the entire fiscal year (10/1 - 9/30) and will not be reliant on the reimbursement to sustain program functionality.
* 4. Your Program understands that this is a reimbursement program up to 50% and is not reliant on SNAP E&T reimbursements to run the program.
* 5. You verify that the information provided in the proposal is true.

Signature denotes confirmation of the above statements:

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Printed Name Title

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Signature Date