

WORKS PROGRESS ADMINISTRATION

PROJECT PROPOSAL

Sponsor's Proposal No. _____ DATE 4/16/42

STATE OF Texas
LOCAL NO.(s) 1-1483 - Supp.1
Unit 18 of WP 17426
STATE APPLICATION NO. _____
(To be filled in by State office)

Request is hereby made that in accordance with this proposal a formal application be made for an authorization to expend Federal funds by the Works Progress Administration, under its rules and regulations, in the amount of \$ 4,305.00

1. Has any part of the proposed work ever been included in a project proposal previously submitted to the WPA? _____ If "Yes,"
(Yes or no)

designate previous proposal(s) _____

2. Has any part of the proposed work ever been included in a previously operated WPA project? _____ If "Yes," designate previous
(Yes or no)

project(s) _____ Indicate approximate percentage of Federal
funds requested in this proposal to be expended for: (a) Completion of such work _____ percent. (b) Additional units or other
work _____ percent. Department of Education

3. Official sponsor(s) University of Texas and State Official address(es) Austin, Texas
Co- San Augustine County School Board San Augustine, Texas

4. Project location: State Texas County San Augustine
In ☒ Near ☐ In and near ☐ County-wide

(City, town, village, township, etc.)

(Check one only for city, town, etc., location. If county-wide, etc., so indicate, and designate WPA supervisory headquarters)
Detailed location of project operations:

San Augustine County Common School Districts with headquarters for purpose of supervision at
Marshall, Harrison County, Texas.

5. Purpose and description of work:

(a) Major purpose: Operation of Adult Education Classes

(b) Description of work: (Type double space; for long description, type on extra sheet and attach. For white-collar projects see special instructions for multiple-type projects on reverse side of this page.)

Provide, coordinate and supervise educational activities in the fields of General Adult, Literacy, Naturalization, Vocational, Home and Family Life, Public Affairs, Education, and Education for Avocational and Leisure time Activities. In accordance with P. L. E-342. O. P. 165-1-66-393.

6. Summary of estimated project costs by sources of funds. (Nearest dollar; no cents. Enter percentages to nearest tenth.)

ITEM OF COST (1)	FEDERAL FUNDS (2)		SPONSOR'S FUNDS (3)		TOTAL (4)	
	Amount (dollars)	Percent	Amount (dollars)	Percent	Amount (dollars)	Percent
(a) Labor:						
1. Unskilled		x x x		x x x		x x x
2. Intermediate		x x x		x x x		x x x
3. Skilled	<u>1435.00</u>	x x x		x x x	<u>1435.00</u>	x x x
4. Professional and technical	<u>2870.00</u>	x x x		x x x	<u>2870.00</u>	x x x
Subtotal (a)	<u>4305.00</u>	<u>100</u>			<u>4305.00</u>	<u>79.0</u>
(b) Superintendence						
Subtotal (a) plus (b)	<u>4305.00</u>	<u>100</u>			<u>4305.00</u>	<u>79.0</u>
(c) Equipment, material, and other nonlabor costs:						
1. Equipment		x x x	<u>310.00</u>	x x x	<u>310.00</u>	x x x
2. Material and supplies		x x x	<u>113.00</u>	x x x	<u>113.00</u>	x x x
3. Other nonlabor costs		x x x	<u>719.00</u>	x x x	<u>719.00</u>	x x x
Subtotal (c) only			<u>1142.00</u>	<u>100</u>	<u>1142.00</u>	<u>21.0</u>
(d) TOTAL COST OF PROJECT	<u>4305.00</u>	<u>100</u>	<u>1142.00</u>	<u>100</u>	<u>5447.00</u>	<u>100</u>
(e) TOTAL COST APPORTIONED	<u>79.0</u>	%	<u>21.0</u>	%	<u>100%</u>	x x x

29. (a) Are preliminary plans and specifications complete? Yes If "No," give date of completion (Date)
(Yes or no)
- (b) Are detailed or final plans and specifications complete? Yes If "No," give date of completion (Date)
(Yes or no)
- (c) Does sponsor assume full responsibility for the adequacy of the design? Yes
(Yes or no)
- (d) Are estimates based on actual cost records of similar work under similar methods and conditions of operations? Yes
(Yes or no)

30. Estimate of cost by items of work (plans, specifications, and other data adequate to substantiate estimated quantities and unit costs should accompany all proposals):

NOTE.—Set up separately and show subtotals for (a) uncompleted portions of previous project, and (b) new work.

(1) QUANTITY	(2) UNIT	(3) DESCRIPTION OF OPERATION OR FEATURE OF WORK (Give break-downs by classes, according to nature of project)	(4) MAN-HOURS (White-collar projects only)	(5) UNIT COST	(6) AMOUNT (dollars) (Omit columns (a) and (b) for white-collar projects)		
					Labor (a)	Nonlabor (b)	Total (c)
8	Mo.	Operation of Adult Education Classes in San Augustine County, Texas. Location of Classes: San Augustine Courthouse Burleson Negro School Pisgah Negro School White Rock Negro School St. John Negro School St. Luke Negro School			4305	1142	5447
TOTAL ESTIMATED COST OF WORK INCLUDED IN THIS PROPOSAL					4305	1142	5447

31. Status of project (fill in only in the case of work to be partially paid for under project(s) now operating):

(a) Unobligated limitation as of (Date), \$.....

(b) Estimated date funds will be exhausted

33. Equipment rental analysis (include supply fund rental or depreciation charges but exclude small tools and equipment purchases, which should be entered in item 34. List all equipment to be used on rental basis on project. A reasonable rental charge must be made for all WPA-owned equipment, even if it is completely amortized.

KIND OF EQUIPMENT	CAPACITY	NUMBER OF UNITS	RENTAL RATE PER UNIT (dollars)	BASE OF RENTAL PER HOUR, DAY, WEEK OR MONTH	AGGREGATE PERIOD OF RENTAL	DOES RENTAL HAVE INCLUDE (Yes or No)		AMOUNT (dollars)		
						(a) Operator's wages	(b) Fuel or power costs	Federal funds	Sponsor's funds	Total
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	
Schoolroom Furniture:										
Chairs, Desks & Tables		Lot	15.00	Mo.	8 Mo.	No	No	120.00	120.00	
Stoves		Lot	4.50	Mo.	8 Mo.	No	No	36.00	36.00	
Maps, Globes, Charts		Lot	7.50	Mo.	8 Mo.	No	No	60.00	60.00	
Reference Sets		Lot	7.50	Mo.	8 Mo.	No	No	60.00	60.00	
Typewriters		1	3.00	Mo.	8 Mo.	No	No	24.00	24.00	
Mimeograph		1	1.25	Mo.	8 Mo.	No	No	10.00	10.00	
TOTAL	XXXXX	XXX	XXXXX	XXX	XXXXXX	XX	XX	310.00	310.00	

34. Materials and supplies analysis (list all items to be used on the project; fill in only columns 1 through 4 for materials available without charge against the funds set up in this proposal and indicate their source):*

DESCRIPTION AND GRADE OF MATERIALS (1)	PLACE OF DELIVERY (2)	QUANTITY (3)	UNIT (4)	UNIT PRICE (5)	AMOUNT (dollars)		
					Federal funds (6)	Sponsor's funds (7)	Total (8)
Misc. Supplies: Work Books, Paper, Pencils, Books, Pamphlets, Chalk and Magazines		Lot				113.00	113.00
TOTAL	XXXXX	XXXXXX	XXXXX	XXXXXX		113.00	113.00

35. Other nonlabor costs analysis (include safety measures, transportation of workers, tool and equipment purchases, supply fund overhead charges, and other nonlabor costs not included in items 33 and 34):*

DESCRIPTION (1)	AMOUNT (dollars)		
	Federal funds (2)	Sponsor's funds (3)	Total (4)
Building Rentals		211.00	211.00
Utilities		508.00	508.00
TOTAL		719.00	719.00

*Use separate lines to show items furnished by sponsor and those requested from Federal funds, items 33, 34, and 35.

32. Labor analysis (see reverse side of this page for instructions):

OCCUPATIONAL CLASSIFICATION (1)	RATE PER HOUR (2)	AVERAGE NUMBER OF WORKERS		MAN-HOURS (5)	HOURS PER MONTH (6)	MAN- MONTHS (7)	RATE PER MONTH (8)	DOLLARS (nearest dollar, no cents)		
		Male (a) (3)	Female (b) (4)					Federal (9)	Sponsor (10)	Total (11)
Unskilled:										
Subtotals	x x x			x	x x		x x x			
Intermediate:										
Subtotals	x x x			x	x x		x x x			
Skilled:										
Teacher (Adult Education)		1	3	C	3120	130	24	59.80	1435.00	1435.00
Subtotals	x x x	1	3	x	3120	x x	24	x x x	1435.00	1435.00
Professional and technical:										
Teacher (Adult Education)		2	4	C	6240	130	48	59.80	2870.00	2870.00
Subtotals	x x x	2	4	x	6240	x x	48	x x x	2870.00	2870.00
LABOR SUBTOTALS	x x x	3	7	x	9360	x x	72	x x x	4305.00	4305.00
Superintendence:										
Subtotals	x x x			x		x x	x x x			
SUBTOTALS (Fed. workers only)	x x x			x	x x x x x x	x x	x x x x	x x x x x x	x x x x x x	x x x x x x
(a) TOTALS (certified workers)	x x x	3	7	x	x x x x x x	x x	x x x x	x x x x	4305.00	x x x x x x
(b) TOTALS (all Fed. workers)	x x x	3	7	x	9360	x x	72	x x x	4305.00	x x x x x x
(c) TOTALS (sponsor's workers)	x x x			x		x x		x x x x x x		x x x x x x
(d) GRAND TOTALS (b plus c)	x x x	3	7	x	9360	x x	72	x x x	4305.00	4305.00

† Denote thus: C, Certified; N, Noncertified; S, Sponsor.

30. SPONSOR'S CERTIFICATE AND AGREEMENT:

SPONSOR'S PROPOSAL NO. _____

DATE 4/16/42

The statements contained in this proposal have been checked by the undersigned and are true to the best of his knowledge and belief. It is certified that this proposed project is for the use or benefit of the public.

It is understood that Federal funds will be expended by the United States Treasury only upon pay rolls and vouchers certified by the Works Progress Administration.

It is further understood that the project will not be placed in operation unless and until assurance is given that the sponsor's pledge will be made available as specified in the proposal, and as required by project operations.

It is agreed that the work proposed, and all operations under the project, will be done in conformance with all legal requirements, the rules and regulations of the Works Progress Administration issued pursuant to the act of Congress under which Federal funds for the prosecution of the project are made available, and in accordance with such specifications as are attached hereto.

It is agreed that the Works Progress Administration is under no obligation to initiate operations under this proposal, if it is approved, nor to complete the project if placed in operation. Further, in consideration of expenditures from Federal funds to be made on the project, it is agreed, if the proposed work is undertaken, that the sponsor will finance such part of the entire cost thereof as is not to be supplied from Federal funds.

Co- SPONSOR San Augustine County School BoardADDRESS San Augustine, Texas

By: Sponsor's authorized agent Mary Lou O. Vitenba County San Augustine County
(Name—type or print) (Title) (Agency) Mary Lou O. Vitenba
(Signature)

By: Sponsor's authorized agent _____
(Name—type or print) (Title) (Agency) (Signature)

To be filled in by State Office

Leave blank

STATE _____

COUNTY _____

LOCAL APPLICATION NO. (s) _____

STATE APPLICATION NO. _____

O. P. No. _____

P. L. No. _____