



Clermont County Board of Developmental Disabilities

Workforce Sustainability Reimbursement Program

(Providers may apply for grants for approved funds from 10/1/21 based on a first-come, first-served basis while funds are available at the discretion of Clermont DD)

Provider Name

Date of Request

Request Type	Reimbursement for How Many?	DSP Name(s) Attached additional page if needed	Cost	Documentation Needed
DSP New Hire Training \$700 per DSP				-Date Hired for New Employee -Training Completed
DSP Annual Renewal Training \$500 per DSP				-Date Hired -Completed Annual Training
DSP Longevity Add-On* \$900 per DSP				-Transcript for 60 hours of coursework through DirectCourse -2 years experience through Employment Experience Form
Hotel Fee Reimbursement* \$130 per DSP				-Receipt from Hotel
OT/Half-Time*				-Payroll detailing OT paid to DSPs -Provider OT Worksheet
Reimbursement Request Total				

***ADA providers are not eligible for reimbursement for overtime, DSP temporary relocation, or DSP longevity add-ons.**

Contact Person

Address

City/State/Zip

Phone

Email

Address to Mail Reimbursement Check

By signing below, I hereby attest that the individual stated above is true and accurate to the best of my knowledge. Funds requested will be used only for DSPs providing ongoing services to individuals supported by Clermont DD. Clermont DD will request repayment of funds if it is determined that funds were distributed and not used as intended.

Applicant Signature

Applicant Title

Date

Send completed for along with corresponding documentation/receipts to: aplanck@clermontd.org

FOR CLERMONT DD USE ONLY

Approval Signature

Date

Amount