



THE PRIVATE ADOPTION AGENCY REIMBURSEMENT PROGRAM (PAARP) FULL TIME EQUIVALENT

1. PROVIDER NAME	2. PROGRAM NAME	3. FISCAL PERIOD	
		Column 1 Lines 5 - 7, 10, 15, 16	Column 2 Lines 4, 8, - 14, 17
4. Projected Direct Salaries Schedule 1 <i>(from Form A)</i>			\$
Projected Direct and Jointly Shared Program Expense: <i>(listed on lines 5 - 7)</i>			
5. Supervision and Support Salaries			
6. Services and Supplies			
7. Occupancy			
8. Subtotal Lines 5 - 7			\$
9. Total Direct Expenses (add Line 4 and Line 8)			\$
10. Projected Indirect Expenses at ____% <i>(each agency will use its own individual percentage)</i>			\$
11. Projected Annual PAARP Program Expenditures			\$
12. Less any offset income - restricted revenue received for your PAARP Program			
13. Projected total Annual PAARP Program Expenditures			\$
14. Number of Projected Completed Adoptions <i>(projected number of placements and finalizations x .5)</i>			
15. Projected Number of adoptive placements			
16. Projected Number of finalizations			
17. Projected Average Cost Per Adoption <i>(projected Total Annual Expenditures divided by the number of completed adoptions)</i>			