Program Staff List

New Hampshire Department of Health and Human Services
Division of Community Based Care Services
Bureau of Drug and Alcohol Services

COMPLETE ONE PROGRAM STAFF LIST FOR EACH PROGRAM YEAR

Agency Name: _____

Program: _____

Budget Period: **July 1, 2010 through December 31, 2010**

A	B	C	D	E	F	G	H
Position Title	**Current Individual in Position**	**Projected Hrly Rate as of 1st Day of Budget Period**	**Hours per Week**	**Proj. Amnt Funded by State Program for Budget Period**	**Proj. Amount from Other Sources for Budget Period**	**Total Salaries All Sources**	**Site***
Example:							
Prenatal Coordinator	Sandra Little	$21.00	40	$21,840	$21,840	$43,680	
						$0.00	
						$0.00	
						$0.00	
						$0.00	
						$0.00	
						$0.00	
						$0.00	
						$0.00	
						$0.00	
						$0.00	
						$0.00	
						$0.00	
						$0.00	
						$0.00	
Total Salaries Funded by State Program				$0.00	$0.00	$0.00	

*Please list which site(s) each staff member works at, if your agency has multiple sites.