

FY 2025 Budget Performance Review
17000 - Construction Industries Board

Version **Original**
Lead Administrator: Janis Hubbard

Date submitted XX/XX/XXXX
Lead Financial Officer: OMES/ABS - Dana West

Agency Mission

Division and Program Descriptions

Note: Please define any acronyms used in program descriptions.

Division or Program Number and Name

0250005 - Skilled Trade Education and Workforce Development

0205005 - Plumbing

0215005 - Building Inspectors

0217005 - Home Inspectors

0245005 - Electrical

0275005 - Mechanical

0295005 - Roofing Contractor Registration

8800002 - Information Services

FY'24 Budgeted Department Funding By Source

[illegible]

1. Please describe source of Local funding not included in other categories:

2. Please describe source(s) and % of total of "Other" funding if applicable for each department:

FY'23 Carryover by Funding Source

Class Fund #	Carryover Class Fund Name	Appropriations	Federal	Revolving	Local ¹	Other ²	Total
							\$0
							\$0
							\$0
1. Please describe source of Local funding not included in other categories:							
2. Please describe source(s) and % of total of "Other" funding if applicable:							

What changes did the agency make between FY'23 and FY'24?

1.) Are there any services no longer provided because of budget cuts?

2.) What services are provided at a higher cost to the user?

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3.) What services are still provided but with a slower response rate?

4.) Did the agency provide any pay raises that were not legislatively/statutorily required?

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1. Please describe source(s) and % of total of "Other" funding for each department:

How would the agency be affected by receiving the same appropriation for FY '25 as was received in FY '24? (Flat/ 0% change)
How would the agency handle a 2% appropriation reduction in FY '25?

What are the agency's top 2-3 capital or technology (one-time) requests, if applicable?		
Description of request in order of priority	Appropriated Amount (\$)	Submitted to LRCPC? (Yes/No)
Priority 1		
Priority 2		
Priority 3		

Federal Funds							
CFDA	Federal Program Name	Agency Dept. #	FY 24 budgeted	FY 23	FY 22	FY 21	FY 20

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Federal Government Impact	
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[illegible]

FY 2024 Budgeted FTE	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
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96	96
97	97
98	98
99	99
100	100

Total	0	0	0	0	0	0
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FTE History by Fiscal Year

Total	0.0	0.0	0.0	0.0	0.0	0.0
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Performance Measure Review	
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Revolving Funds (200 Series Funds)			
<i>Please provide fund number, fund name, description, and revenue source</i>	FY'21-23 Avg. Revenues	FY'21-23 Avg. Expenditures	June '23 Balance
Fund number: Fund name			
Describe fund purpose and revenue source			

FY 2024 Current Employee Telework Summary						
<i>List each agency location, then report the number of employees associated with that location in the teleworking categories indicated. Use "No specified location" to account for remote employees not associated with a site. Use actual current employees (headcount), not budgeted or actual FTE.</i>			Full-time and Part-time Employees (#)			
Agency Location / Address	City	County	Onsite (5 days onsite, rarely remote)	Hybrid (2-4 days onsite weekly)	Remote (1 day or less weekly onsite)	Total Employees
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
Total Agency Employees						0