Employer Burden and Employment-Related Costs Template Form

"Employer burden" is the required cost associated with hiring employees. These costs are included in the Self-Determination Program (SDP) participant's spending plan and calculated as a percentage of wages paid to the SDP participant's employees or actual cost of the employer burden item.

Financial Management Service (FMS) Name:	Date of Submission:
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FMS Vendor Number:

Below values to be entered as percentages.

	Taxes					Other	
FMS Model	FICA (Social Security)	FICA (Medicare)	FUTA (Federal Unemployment)	SUTA (State Unemployment)	ETT (Employment Training Tax)	Workers' Compensation Insurance*	Paid Sick Leave**
Sole Employer							
Co- Employer							

^{*} For FMS providers offering a workers' compensation insurance option under sole employer, include percentage here. Otherwise, note "TBD" to indicate it is "To Be Determined" with the SDP participant.

Date of Regional Center Review:	Effective Date:
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^{**} Paid Sick Leave may vary based on local laws.