

# ATTACHMENT C

## Massachusetts Fiscal Year 2015 Local Annual Plan

### **NOTIFICATION of LOCAL SYSTEM CHANGES**

#### FISCAL YEAR 2015 CHANGES

**Please describe any programmatic, infrastructure or organizational changes planned for FY2015, including those that will result from any budget reduction/augmentation.**

Please complete this form and submit as part of your FY2015 Local Annual Plan package.

**Local Area:** \_\_\_\_\_

**Are changes planned for FY2015:**                       YES                       NO

If significant service design or other changes from FY2014 are planned for FY2015, describe below each change to the local workforce development model. For each planned change, the description should include both:

- a. A discussion of the basis for the planned change, and
- b. A discussion of the projected outcome(s) and benefit(s) to be realized as result of the planned change.

**Describe Changes:**