



DEPARTMENT OF  
HIGHER EDUCATION &  
WORKFORCE DEVELOPMENT

## **Missouri Higher Education Initiatives**

# **FY 2025 MoExcels**

Funded by:

**Missouri Department of Higher Education &  
Workforce Development (DHEWD)**

In partnership with:

**Office of the Governor  
Office of Administration**

July 2025

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## **I. Summary**

MoExcels funding facilitates development and expansion of employer-driven education and training programs to substantially increase educational attainment. Funding recommended through MoExcels is available for a single fiscal year. If full funding of a project requires a multi-year phase in, each year's funding should stand on its own in the event that funds are not appropriated in subsequent years. A core funding increase may be requested after the third year in which a funded project achieves its performance goals. MoExcels is being funded through the Federal Budget Stabilization Fund.

DHEWD will continue to work with partners and colleges on workforce needs through other opportunities as they become available, either through various non-profits, philanthropy, or federal grants.

## **II. FY 2025 MoExcels Funded Proposals**

## **III. Budget Modifications**

If a change needs to be made to your funded project, you must submit a budget modification form to the [reimbursements@dhewd.mo.gov](mailto:reimbursements@dhewd.mo.gov) inbox. The budget modification form can be found on the DHEWD Reimbursements Website: <https://dhewd.mo.gov/reimbursements.php> . We will review your requested change and respond by email.

## IV. Fiscal Reimbursement Process

All MoExcels reimbursement requests are to be uploaded to the DHEWD Box Account <https://stateofmissouri.account.box.com> and must include the Mo Excels Reimbursement Form, all backup invoices, and proof of payment by either providing a check number and/or a copy of the check.

The reimbursement form and guidance for allowable expenses and matching fund requirements can be found on the DHEWD Reimbursements Website: <https://dhewd.mo.gov/reimbursements.php>

If you still have questions regarding allowable expenses, email your inquiry to the [reimbursements@dhewd.mo.gov](mailto:reimbursements@dhewd.mo.gov) inbox and a DHEWD staff member will research the question.

### How to submit for MoExcels Reimbursement:

1. Complete the FY 2025 MoExcels Reimbursement Form and gather supporting documents (invoices, proof of payment, etc.).
2. Submit the form and all supporting documentation to the DHEWD Box Account <https://stateofmissouri.account.box.com>.
  - a. Files and folders must be named using the following format:  
**FY25\_InstitutionName\_MoExcels\_Req#X\_DateUploaded (2024XXxx)**
  - b. We cannot accept purchase orders or packing slips in lieu of invoices.
3. Send an email notification to the Reimbursement's inbox [reimbursements@dhewd.mo.gov](mailto:reimbursements@dhewd.mo.gov) The email notification provides DHEWD with a point of contact (POC) for the request. The POC is necessary in the event we have questions and to receive notification the reimbursement has been processed.

### DHEWD's Process:

1. Reimbursement requests will be reviewed in the order received. If documentation is missing, we will notify you by email. Your request will not be processed until all proper backup documentation has been received.
2. After the review process is complete, the department will enter payment into the SAMII Financial System.
3. Funds will be available two business days after the reimbursement is processed and approved in the SAM II Financial System. A notification email will be sent to the POC.

Upload Reimbursement Form and backup documentation to the DHEWD Box Account:  
<https://stateofmissouri.account.box.com>

DHEWD reviews request

Requests will be processed in the order received.

Payments are entered and require second approval.


Second approval is received.

2 business days for payment to process

Payment received by Institutions.



# V. FY 2025 Mo Excels Reimbursement Form

		STATE OF MISSOURI DEPARTMENT OF HIGHER EDUCATION & WORKFORCE DEVELOPMENT 301 W. High St., P.O. Box 1469, Jefferson City, MO 65102-1469		Please upload documentation to: <a href="https://stateofmissouri.app.box.com">https://stateofmissouri.app.box.com</a>	
<b>Reimbursement Request Form:                  FY 2025 MoExcels Projects</b>					
Institution Name:			Billing Contact Name:		
<input type="text"/>			<input type="text"/>		
Expense Period Beginning:		Expense Period Ending:		Phone Number & Email:	
<input type="text"/>		<input type="text"/>		<input type="text"/>	
Project Name:		State Budget Amount Authorized		Cash and In-Kind Matching Funds	
<input type="text"/>		<input type="text"/>		<input type="text"/>	
Brief Description of Project:					
<input style="width: 100%; height: 100%;" type="text"/>					
<b>Budget Changes Require Pre-Approval.</b> - Institutions are expected to submit revised budget forms to the department for approval prior to incurring expenditures. -Budget changes will be authorized in writing via email and these changes should be documented in your official project file. -Change requests must be emailed to: <a href="mailto:reimbursements@dhewd.mo.gov">reimbursements@dhewd.mo.gov</a> -Reimbursement requests should be uploaded to the DHEWD Box Account: <a href="https://stateofmissouri.app.box.com/">https://stateofmissouri.app.box.com/</a>					
Amount of Funds Which Have Been Expended and For Which Reimbursement Is Claimed: (Please provide documentation of expenditures)					
Date Purchased	From Whom Purchased	Description of Item		Expenditure	
Cash & In-Kind Match Money Spent				Amount to be Reimbursed	
				\$ -	
<b>CERTIFICATIONS</b>					
I hereby certify that the information reported herein is correct to the best of our knowledge and belief and is consistent with the intent of the appropriation.					
Institution President's Signature:			Date:		
<input style="width: 100%;" type="text"/>			<input style="width: 100%;" type="text"/>		

## **VI. Performance and Project Reporting**

Funding recipients must report on performance annually until the program has achieved its objectives.

Reports to be submitted by:

- ◆ October 31<sup>st</sup>
- ◆ January 31<sup>st</sup>
- ◆ April 30<sup>th</sup>
- ◆ July 31<sup>st</sup>

## **VII. DHEWD Contact Information**

Direct all questions and comments to [reimbursements@dhewd.mo.gov](mailto:reimbursements@dhewd.mo.gov).

### **Additional Information**

<https://dhewd.mo.gov/reimbursements.php>

- MoExcels Information Packet
- MoExcels Quarterly Reporting Form
- MoExcels Budget Adjustment Template
- DHEWD Project Allowable Expenses and Fund Match Guidance

<https://dhewd.mo.gov/initiatives/moexcels.php>

- Program Overview
- Program History