TO:	Angela Calvillo, Clerk of the Board of Supervisors
FROM:	Lisa Pagan, Director of Policy and Planning, Office of Economic and Workforce Development
DATE:	February 19, 2019
SUBJECT:	Accept and Expend Resolution for State Grant
GRANT TITLE:	SlingShot 2.0 Tech Apprenticeship System Design
Attached please f	ind the original* and 1 copy of each of the following:
X_ Proposed gra	nt resolution; original* signed by Department, Mayor, Controller
X Grant informa	ation form, including disability checklist
X Grant budget	
X_ Grant applica	tion
X_ Grant award le	etter from funding agency
Ethics Form	126 (if applicable)
Contracts, Le	eases/Agreements (if applicable)
Other (Explain	in):
Special Timeline	Requirements:
Program begins A	April 1, 2019
Departmental re	presentative to receive a copy of the adopted resolution:
Name: Lisa Paga	n Phone: (415) 554-6936
Interoffice Mail A Francisco, CA 94	ddress: 1 Dr. Carlton B. Goodlett Pl., City Hall, Room 448, San 102
Certified copy red (Note: certified copie funding agencies. In	quired Yes No No nest have the seal of the City/County affixed and are occasionally required by most cases ordinary copies without the seal are sufficient).