| File Number:(Provided by Clerk of Board of S | upervisors) | | | |
|--|---------------------------|-----------------------|----------------------------|-------------------|
| | | on Information Fo | <u>orm</u> | |
| Purpose: Accompanies proposexpend grant funds. | sed Board of Superviso | ors resolutions auth | norizing a Departme | nt to accept and |
| The following describes the gra | ant referred to in the ad | ccompanying resol | lution: | |
| 1. Grant Title: Crankstart Be | fore and Aftercare Pr | ograms Grant | | |
| 2. Department: The Department of Children Youth and Their Families | | | | |
| 3. Contact Person: Sherrice | Dorsey | Tele | phone: 628-652-71 4 | 16 |
| 4. Grant Approval Status (che | ck one): | | | |
| [X] Approved by fundin | g agency | [] Not yet a | approved | |
| 5. Amount of Grant Funding A | approved or Applied for | : \$10,000,000 | | |
| 6a. Matching Funds Required: b. Source(s) of matching fund | | | | |
| 7a. Grant Source Agency: Cra b. Grant Pass-Through Agen | | | | |
| 8. Proposed Grant Project Su | ımmary: | | | |
| The grant will be used to programs for San Francis | | | | ore and aftercare |
| 9. Grant Project Schedule, as | allowed in approval do | ocuments, or as pr | oposed: | |
| This project is intended f | or Fiscal Year (FY) 20 | 021-22 and 2022-2 | 23. | |
| Start-Date: July 1, | 2021 | End-Date: June | 30, 2023 | |
| 10a. Amount budgeted for con | tractual services: \$10,0 | 000,000 | | |
| b. Will contractual services be purpose. | pe put out to bid? No, e | existing contracts | s are in place for th | is service |
| c. If so, will contract service requirements? N/A | s help to further the go | oals of the Departn | nent's Local Busines | s Enterprise (LBE |
| d. Is this likely to be a one-t | time or ongoing reques | st for contracting or | ut? One-time | |
| 11a. Does the budget include i | indirect costs? | []Yes | [X] No | |
| b1. If yes, how much? N/A b2. How was the amount ca | lculated? N/A | | | |

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c1. If no, why are indirect costs not included?
[] Not allowed by granting agency
[] Other (please explain):

| c2. If no indirect costs are included, what would have been the indirect costs? | | | | | |
|---|---|---|--|--|--|
| The contract administration of the community-based organization has been operationalized within the existing contracts, therefore no indirect costs required. | | | | | |
| 12. Any other significant grant requirements or comments: | | | | | |
| **Disability Access Checklist***(Department must forward a copy of all completed Grant Information Forms to the Mayor's Office of Disability) | | | | | |
| 13. This Grant is intended for activities at (check all that apply): | | | | | |
| [] Existing Site(s) [] Rehabilitated Site(s) [] New Site(s) | [] Existing Structure(s) [] Rehabilitated Structure(s) [] New Structure(s) | [X] Existing Program(s) or Service(s)[] New Program(s) or Service(s) | | | |
| 14. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to: | | | | | |
| 1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures; | | | | | |
| 2. Having auxiliary aids and services available in a timely manner in order to ensure communication access; | | | | | |
| Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers. | | | | | |
| If such access would be technically infeasible, this is described in the comments section below: | | | | | |
| Comments: The sites for the before and aftercare programs are ADA compliant. | | | | | |
| | . • | · | | | |
| Departmental ADA Coordinator or Mayor's Office of Disability Reviewer: | | | | | |
| Anthony Tek (Name) | | | | | |
| Operations Assistant | | | | | |
| (Title) Date Reviewed: 11/15/2021 | <u>. </u> | Docusigned by: Anthony Tek (Signature Required) | | | |
| | | | | | |

[X] To maximize use of grant funds on direct services

Department Head or Designee Approval of Grant Information Form:

| Maria Su, Psy.D. | |
|--|-----------------------|
| (Name) | |
| Executive Director, Department of Children, Youth & Their Families | 3 |
| (Title) | DocuSigned by: |
| Date Reviewed: 11/16/2021 | Maria Su |
| Date Noviewed. | (Sightature Redulred) |

Ma, Mendy (CHF)

From: Jessica Sutton <jsutton@pfs-llc.net>
Sent: Thursday, November 18, 2021 12:12 PM

To: Ma, Mendy (CHF)

Cc: Stefani Willis; Burbage, Heidi (CHF); Dorsey, Sherrice (CHF)

Subject: RE: Crankstart Grant Start and End Date

This message is from outside the City email system. Do not open links or attachments from untrusted sources.

Hi Mendy,

Thanks so much for checking in and helping move this forward swiftly. Yes, that is the grant period – covering the 2021-2022 and 2022-2023 academic years. \$5m will be paid as soon as possible and the second \$5m in 2022.

Thank you, Jess

Jessica Sutton | Senior Grants Manager CRANKSTART FOUNDATION

1660 Bush Street, Suite 300, San Francisco, CA 94109 | 415.561.6540 ext. 238

Pronouns: she/her

A partner of Pacific Foundation Services

From: Ma, Mendy (CHF) <mendy.ma@dcyf.org> **Sent:** Thursday, November 18, 2021 12:06 PM **To:** Jessica Sutton <jsutton@pfs-llc.net>

Cc: Stefani Willis <swillis@pfs-llc.net>; Burbage, Heidi (CHF) <heidi.burbage@dcyf.org>; Dorsey, Sherrice (CHF)

<sherrice.dorsey@dcyf.org>

Subject: Crankstart Grant Start and End Date

Importance: High

Hi Jess,

This is Mendy Ma. I am working with our Controller's Office to get the approval to accept the Crankstart grant. We are making good progress, but since the award letter didn't specify the start and end date, could you please help us confirm this \$10,000,000 grant is for the period of 7/1/2021 to 6/30/2023? We understand you have a check cutting deadline and are trying to rush this process. If you could confirm for us at your earliest convenience, that would be greatly appreciated.

Thank you in advance!



Zhimin (Mendy) Ma, CPA

Budget Manager | Pronouns: she, her, hers
SF Department of Children, Youth and Their Families
1390 Market Street, Suite 900 | San Francisco | CA 94102
P: 628-652-7143 | Mendy.Ma@dcyf.org | www.dcyf.org