| File Number: | | |
|--------------|--------------------------------|--|
| | Clerk of Board of Supervisors) | |
| | <u>Grant</u> | |

Grant Ordinance Information Form

(Effective July 2011)

Purpose: Accompanies proposed Board of Supervisors ordinances authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

- 1. Grant Title: Charles Stewart Mott Foundation to Support Kindergarten to College Program
- 2. Department: Office of the Treasurer & Tax Collector
- **3.** Contact Person: Amanda Fried Telephone: (415) 554-0889
- 4. Grant Approval Status (check one):
 - [x] Approved by funding agency [1] Not yet approved
- 5. Amount of Grant Funding Approved or Applied for: \$365,000
- **6.** a. Matching Funds Required: \$0
 - b. Source(s) of matching funds (if applicable):
- 7. a. Grant Source Agency: Charles Stewart Mott Foundation
 - b. Grant Pass-Through Agency (if applicable):
- 8. Proposed Grant Project Summary:

To support the efforts of the Kindergarten to College program to strengthen outreach, operations, and advance continue to advance a cradle to career model to help ensure all young people can achieve college or post-secondary certification.

9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: September 1, 2019

End-Date: August 31, 2021

- 10. Number of new positions created and funded: 1 position created and funded.
- **11.** Explain the disposition of employees once the grant ends? Position is permanent exempt. It is anticipated that the position will be funded by another grant source following the two-year period.
- **12.** a. Amount budgeted for contractual services: 0
 - b. Will contractual services be put out to bid? No
 - c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements?
 - d. Is this likely to be a one-time or ongoing request for contracting out?
- 13. a. Does the budget include indirect costs?

[X] Yes [] No

- b. 1. If yes, how much? \$33,182
- b. 2. How was the amount calculated? Administrative Overhead at 10%
- c. 1. If no, why are indirect costs not included?

| [] Not allowed by granting agency [] To maximize use of grant funds on direct services [] Other (please explain): c. 2. If no indirect costs are included, what would have been the indirect costs? | | | |
|--|--|--|--|
| 14. Any other significant grant requirements or comments: No | | | |
| **Disability Access Checklist*** | | | |
| 15. This Grant is intended for activities at (check all that apply): | | | |
| [x] 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) | |
| 16. 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 access laws and regulations and will allow the full inclusion of persons with disabilities, or will require unreasonable hardship exceptions, as described in the comments section: | | | |
| Please consult with mod as needed regarding providing plasonable accommodations within the program. | | | |
| Departmental ADA Coordinator or Mayor's Office of Disability Reviewer: | | | |
| Ni Cole Bohn (Name) | | | |
| Director, Major's Office on Disability | | | |
| Date Reviewed: May | | (Signature Required) | |
| Overall Department Head or | Deciones Approvals | | |
| Overall Department Head or Designee Approval: | | | |
| (Name) Tail SV | jav | | |
| (Title) Chief Assistant Treasurer | | | |
| Date Reviewed: 5/2 | 2/2019 | (Signature Required) | |