

RFQ: TECHNICAL ASSISTANCE & CAPACITY BUILDING COVERSHEET TEMPLATE

APPLICANT'S CONTACT INFORMATION:		FISCAL AGENT'S CONTACT INFORMATION (ONLY IF USING A FISCAL AGENT)	
Organization Name:		Fiscal Agent Name:	
Contact Name:		Contact Name:	
Title:		Title:	
Street Address:		Street Address:	
City & Zip Code:		City & Zip Code:	
Telephone:		Telephone:	
E-mail:		E-mail:	
Is the organization a registered City Vendor?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Is the fiscal agent a registered City Vendor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Organization's current annual budget	\$	Fiscal Agent's current annual budget	\$

CHECK SERVICE AREA(S) YOUR TECHNICAL ASSISTANCE, CAPACITY BUILDING AND/OR PROFESSIONAL DEVELOPMENT SERVICES WOULD ADDRESS:	
<input type="checkbox"/> Cross Cutting (applies to multiple Service Areas) <input type="checkbox"/> Educational Supports <input type="checkbox"/> Emotional Well-Being <input type="checkbox"/> Enrichment, Leadership & Skill Building (ELS) <input type="checkbox"/> Family Empowerment	<input type="checkbox"/> Justice Services <input type="checkbox"/> Mentorship <input type="checkbox"/> Out of School Time (OST) <input type="checkbox"/> Youth Workforce Development <input type="checkbox"/> Educational Supports
Would the Services you are proposing be able to support to DCYF University?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Would the Services you are proposing be able to support to DCYF's Critical Agency Support?	<input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICANT'S EXPERIENCE & CURRENT WORK:			
Number of years providing technical assistance, capacity building and/or professional development services in the Service Areas checked off above:			
Is your organization currently providing technical assistance, capacity building and/or professional development services for DCYF?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is your organization <u>currently</u> providing technical assistance, capacity building and/or professional development services for other City Departments?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>If yes, please provide the information below for the current technical assistance, capacity building and/or professional development services you are providing to other San Francisco City Departments</i>			
CITY DEPARTMENT	CONTRACT LENGTH	CONTRACT AMOUNT	BRIEF DESCRIPTION OF SCOPE OF WORK
		\$	
		\$	
		\$	
		\$	
		\$	