



## **BOARD OF SUPERVISORS AGENDA ITEM REPORT** **CONTRACTS / AWARDS / GRANTS**

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: November 5, 2019

*\* = Mandatory, information must be provided*

or Procurement Director Award ☐

**\*Contractor/Vendor Name/Grantor (DBA):**

Arizona Department of Education - Title II

**\*Project Title/Description:**

Compliance Specialist

**\*Purpose:**

Title II funds will pay for a Compliance Specialist to work with Pima Vocational High School administration in order to maintain full compliance on all required documentation.

Indirect Costs: Not Applicable

**\*Procurement Method:**

Not applicable

**\*Program Goals/Predicted Outcomes:**

Title II funds will pay for a Compliance Specialist to work with Pima Vocational High School administration in order to maintain full compliance on all required documentation for state educational regulations.

**\*Public Benefit:**

The Compliance Specialist will provide consulting services to Pima Vocational High School in order to maintain compliance with Arizona Department of Education regulations.

**\*Metrics Available to Measure Performance:**

Consistency of being in good standing by establishing policies and procedures which comply with the National Disabilities Act.

**\*Retroactive:**

Yes, school has been utilizing alternative funding from previous SY to continue funding Compliance Specialist. If not approved, alternative funding sources would be utilized creating a negative impact to the overall budget.

**Contract / Award Information**

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e., 15-123): \_\_\_\_\_

Effective Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_ Prior Contract Number (Synergen/CMS): \_\_\_\_\_

☐ Expense Amount: \$\* \_\_\_\_\_ ☐ Revenue Amount: \$ \_\_\_\_\_**\*Funding Source(s) required:**Funding from General Fund? ☐ Yes ☐ No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_Contract is fully or partially funded with Federal Funds? ☐ Yes ☐ No**If Yes, is the Contract to a vendor or subrecipient?**Were insurance or indemnity clauses modified? ☐ Yes ☐ No*If Yes, attach Risk's approval.*Vendor is using a Social Security Number? ☐ Yes ☐ No*If Yes, attach the required form per Administrative Procedure 22-10.***Amendment / Revised Award Information**

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e., 15-123): \_\_\_\_\_

Amendment No.: \_\_\_\_\_ AMS Version No.: \_\_\_\_\_

Effective Date: \_\_\_\_\_ New Termination Date: \_\_\_\_\_

Prior Contract No. (Synergen/CMS): \_\_\_\_\_

☐ Expense or ☐ Revenue ☐ Increase ☐ Decrease Amount This Amendment: \$ \_\_\_\_\_Is there revenue included? ☐ Yes ☐ No If Yes \$ \_\_\_\_\_**\*Funding Source(s) required:**Funding from General Fund? ☐ Yes ☐ No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_**Grant/Amendment Information** (for grants acceptance and awards)☒ Award ☐ AmendmentDocument Type: GTAW Department Code: CS Grant Number (i.e., 15-123): 20\*053Effective Date: 07/01/2019 Termination Date: 06/30/2019 Amendment Number: \_\_\_\_\_☐ Match Amount: \$ \_\_\_\_\_ ☒ Revenue Amount: \$ 2,261.37**\*All Funding Source(s) required:** Arizona Department of Education**\*Match funding from General Fund?** ☐ Yes ☒ No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_**\*Match funding from other sources?** ☐ Yes ☒ No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_**\*Funding Source:** \_\_\_\_\_**\*If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?**Funds are passed through AZEDContact: Vanessa MendozaDepartment: CSET - Pima Vocational High SchoolTelephone: 520-724-9915

Department Director Signature/Date: \_\_\_\_\_

10-31-19

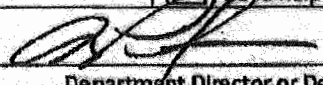
Deputy County Administrator Signature/Date: \_\_\_\_\_

County Administrator Signature/Date: \_\_\_\_\_

(Required for Board Agenda/Addendum Items)

# GRANT APPLICATION APPROVAL REQUEST

Instructions: Fill out the application in full completely. Submit the program Grants Management & Innovation (GMI) and your funding assistance (724-9737). And your completed request to GMI@pima.gov. Your request will be forwarded to County Administration for review. Notification of approval requests should be submitted at least 15 business days prior to the application submission deadline (10/5/2019).

Requesting department or entity:	CSET	Date: 9/20/19
Contact information:	Name: Michele Ray	Telephone: 724-9737
Funding opportunity title:	ESEA Title II	
Link to opportunity:	There is no NOFO. There is a 4 page assurances document described below.	
Funding agency:	Arizona Department of Education	
Amount to be requested:	\$ 2,281.37	
Due date and time:	5/1/2019	PM
What are you going to spend the money on?	Title II funds will pay for a compliance specialist to work with PVHS admin in order to maintain full compliance on all required documentation. (\$2,281.27)	
What will be the benefit to Pima County?	Title II Provide consulting services to Pima Vocational High School to maintain compliance to Arizona Department of Education.	
Indirect costs – check one:	<input type="checkbox"/> I will be requesting indirect costs. Indirect-cost rate to be requested: -0- % <input checked="" type="checkbox"/> I have attached a request for waiver of indirect costs (GMI Intranet) <input type="checkbox"/> I need help understanding indirect costs No waiver necessary. See Other Factors, pg 2.	
By: 	Date: 10-7-19	
Department Director or Designee		

<b>GRANT COST/BENEFIT ANALYSIS</b> <i>To be completed by GMI staff</i>	
CFDA No.	84.027A
Competitive Criteria:	Pima Vocational High School has already applied and won grant funding under IDEA Consolidated, the Individuals with Disabilities Education Act (IDEA) program.
Other Factors:	This grant does not include indirect because 100% of the budget will pass through to a subcontract, and because this grant does not include any Pima County labor. There is no waiver attached because indirect does not apply to the details of this grant.
Number of Awards:	N/A <span style="float: right;">Total amount to be awarded:</span>
Match Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If required what is the amount/percent: _____	
Terms Notes (e.g. unusual restrictions, reporting burdens, etc.):	This program falls under 2CFR-200, with very few and non burdensome "assurances" spelled out in a 1 page "Assurances" document. These assurances mainly consist of being in good standing and establishing policies and procedures which comply with national the National Disabilities Act.
<div style="display: flex; justify-content: space-between;"> <div> Will this project require additional office/project space?  Will this project require staff time that cannot be paid for by the grant?  Will your project require any equipment items over \$5,000 per item?  Does the proposal use a fixed price contract?  Is this project subject to Human Subjects compliance?  Does this project involve subrecipients?  Is there a Statutory Funding Preference from the funding agency? </div> <div style="text-align: right;"> <div style="display: flex; justify-content: space-between;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> <div style="display: flex; justify-content: space-between;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> <div style="display: flex; justify-content: space-between;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> <div style="display: flex; justify-content: space-between;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> <div style="display: flex; justify-content: space-between;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> <div style="display: flex; justify-content: space-between;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> <div style="display: flex; justify-content: space-between;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</div> </div> </div>	
Allowable Indirect Rate: _____ If indirect is not allowed, attach documentation.	
List any other proposal or funder specific requirements:	
GMI notes & recommendations: This is a standard educational program with non-burdensome requirements. I recommend approval of this grant. Completed by Josh Cohn	
By: <u><i>Amy Fish</i></u> <span style="float: right;">Date: <u>10/21/19</u></span> <div style="text-align: center; margin-top: -10px;">GMI Director</div>	
County Administrator Approval Request	
Approved: <input checked="" type="checkbox"/> Not Approved: _____ Subject to Further Review: <input type="checkbox"/> Yes <input type="checkbox"/> No	
If your project is subject to further review, please contact your GMI Lead to discuss necessary revisions prior to resubmission of the Grant Approval Application Request.	
By: <u><i>Jaur</i></u> <span style="float: right;">Date: <u>10/22/2019</u></span> <div style="text-align: center; margin-top: -10px;">County Administrator or Designee</div>	