ATTACHMENT Grant Summary Form

This form is available on the County's Intranet.

County of Siskiyou

GRANT SUMMARY FORM

Grant No.(CFDA)

GENERAL INFORMATION Grant Title

CDPH Career Ladders	
General Description of Grant Work scope	

CDPH awarded funding to local health departments to support staff educational pursuits and workforce upskilling.

Granting Agency FED 🖌 STATE OTHER Agency Contact Phone No. CA Dept of Public Health K. Guerrero kristen.guerrero@cdph.ca.g Responsible Department **Department Contact** Extension No. Public Health 530-841-2140 Shelly Davis Board Approval Date **Application Date** Award Date Est'd Completion Date 1/31/2023 4/21/2023 6/30/2024

GRANT COST AND REVENUE SUMMARY

Program Cost Summary	Total	Grant Portion
Revenue (Please display with brackets <>)		-65,400.00
Soft/hard cash match or In kind (<>)		
Staffing	7,500.00	7,500.00
Contract Services		
Supplies & Other Operating Expenditures	57,900.00	57,900.00
Capital Outlay		
Indirect Cost@% of Direct Costs		
TOTAL GRANT COSTS AND REVENUES	\$ 65,400.00	\$ 0.00
How Was Grant Portion Determined?		
Through competitive application		

Budget Amendment Request Required?	🗌 Yes 🖌 No	If yes, please attach copy of Budget
Appropriation Transfer		

Per recommended motion authorizing the Auditor to establish budget appropriations and set expenditures

Does this grant allow for supplanting? 🔲 Yes 🛛 🗹 No
Does this grant allow for program income? 🗌 Yes 🗹 No
Will this require an advance of grant dollars? 🗌 Yes 🔽 No

OTHER COMMENTS (note any significant or unusual compliance requirements)

Grant allows for and is planning to provide expanded educational reimbursements to PH staff	

Use reverse side if necessary to provide additional information

Prepared By: Michelle Line

Date: <u>5/4/2023</u>

****Please attach a copy of the grant guidelines and all supporting documents that relate to the program cost summary section.