THIS FORM MAY NOT  AND UNDER NO CIRCUMSTANCES CA			I TEDED		
AND UNDER NO CIRCUIVIS I ANGES CA	DISTRICT USE ONLY				
Board of Governor's, California Community Colleges					
Chancellor's Office - 6870	District (Grantee): Chabot-Las Positas CCD				
	College: N/A				
Contract (Grant) Agreement	BOG-CCCCO USE ONLY				
Workforce and Economic Development Division	Grant Agreement No.: 18 - 205 - 001				
Strong Workforce Program Fiscal Agent	Funding Year (Enactment Year)				
			. =	Φ.	2 222 222
RFA# - Articles I - Revised: 05 2018	2018-19	Total Amo	unt Encumbered	:_\$_	9,800,000
Articles II - Revised: 05 2014	2				
RFA Instructions are incorporated into this grant by reference.  The total amount payable for this grant shall not exceed the amount specified above as "Amount Encumbered".  The term of this grant shall be from July 1, 2018 to December 31, 2019. The Final Report must be submitted within 30 days of the grant end date.  Funding under this grant is contingent upon the availability of funds, and is subject to any additional restrictions, limitations or conditions enacted in					
the state budget and/or Executive Orders that may affect the provisions, term, or funding of this agreement in any manner.  GRANTEE					
Project Director: Julia Dozier	Total Grant Funds	Requested:	\$ 9,800,0	000	
Signature, Chief Executive Officer (or authorized Designee)	× ×	•	Date:		
Print Name/Title of Person Signing:	District Address: 7600 Dublin Blvd, Third Floor				
Ronald Gerhard, Business Services	District Address.				
Ronald Gernard, Business Services  Dublin, CA 94568  STATE OF CALIFORNIA					
Project Monitor:	Agency Address:	1102 O Stre	et, Suite 4400		
Nita Patel	Ageries / tagrees.	Sacramento, CA 95811-6539			
Bus.	-t Obanton	1	Funding Year		A a m 6
Unit Ref No Fund FI\$Cal Prgm SubTask Index Obje		Statute	(Enactment Year)	ď	Amount
6870 - 101 - 0001 - 5675119 - 205 - 3235 - 54320	000	2018	2018-19	\$	9,800,000
6870		Total Amour	nt Encumbered	· \$	9,800,000
Signature, Accounting Manager (or Authorized Designee) Budgeted funds are available for the p	period and purpose of the			<u> </u>	,,,,,,,
	25 10	37.3			
Signature, Deputy Chancellor (or authorized Designee)			Date:		
Signature, Deputy Charicenor (or authorized Designee)					
Drint Name/Title of Person Signing:			Date:		
Print Name/Title of Person Signing:  Daisy Gonzales, Deputy Chancellor					