

EXHIBIT A

Participation Agreement - Summary Sheet

Scope of Work for Strong Workforce Program – Regional Funds

This Participation Agreement constitutes [College Name’s] Scope of Work for the 2016-2017 allocation of Strong Workforce Regional Funds under the Master Agreement, [Agreement No.], and is subject to the terms and conditions as outlined in the Master Agreement.

NOTE: Complete one Summary Sheet for the college's Participation Agreement, but complete a Budget Detail Sheet and Work Plan for each project.

| | |
|---|--------------------------------|
| Participation Agreement Number | <i>DO-17-2xxx-01.x or 02.x</i> |
| Fiscal Year Allocation | <i>2016-2017</i> |
| Term | <i>07/01/2016 - 12/31/18</i> |
| Name of College | |
| District | |
| Participation Agreement Point of Contact | |
| Name | |
| Title | |
| Address | |
| City, State Zip | |
| REGIONAL PROJECTS – General Information (add rows for more projects if needed) | |
| 1. Project Name | |
| a. Is the college a Lead for this Project? | |
| b. Amount of funds for this college’s work on the project | |
| c. Brief description the college’s work on the project. | |
| 2. Project Name | |
| a. Is the college a Lead for this Project? | |
| b. Amount of funds for this college’s work on the project | |
| c. Brief description of the college’s work on the project. | |
| 3. Project Name | |
| a. Is the college a Lead for this Project? | |
| b. Amount of funds for this college’s work on the project | |
| c. Brief description of the college’s work on the project. | |
| 4. Project Name | |
| a. Is the college a Lead for this Project? | |
| b. Amount of funds for this college’s work on the project | |
| c. Brief description of the college’s work on the project. | |

Name: _____ Date _____
 President or Designee

Name: _____ Date _____
 Fiscal Officer or Designee

EXHIBIT A

**Strong Workforce Program Regional Funds
 FY 2016-2017
 Term: 7/1/16 - 12/31/18**

**COLLEGE:
 DISTRICT:
 PROJECT NAME:**

NOTE: Create one Budget Detail Sheet per Project.

| OBJECT CODE | DESCRIPTION OF COST & CALCULATION | AMOUNT |
|-------------|-----------------------------------|--------|
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| | TOTAL COSTS | 0 |

EXHIBIT A

Strong Workforce Program Regional Funds
FY 2016-2017
Term: 7/1/16 - 12/31/18

COLLEGE:
DISTRICT:
PROJECT NAME:

NOTE: Create a separate Work Plan for each project.

| ACTIVITY | OUTCOME | TIMELINE | PERSON(S) RESPONSIBLE |
|----------|---------|----------|--------------------------|
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