


Contract #: Boilerplate WIA Program  
Index Code: 531182

# CONTRACT ROUTING SHEET

Date Prepared: 2/9/15 TO Counsel 2-19-15

Need Date: 3/3/15 HW

**PROCESSING DEPARTMENT:**

Department: HNSA/Community Services  
Dept. Contact: Heather Longo  
Phone #: X7373  
Department  
Head Signature:   
Don Ashton, M.P.A., Director

**CONTRACTOR:**

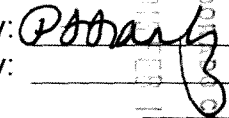
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**CONTRACTING DEPARTMENT:** HNSA/Community Services

Service Requested: Resolution to delegate signature authority to HNSA Director in signing boilerplate agreements (On-the-job training, Work experience [inside and outside employer], individual training account, and Individual Referral.

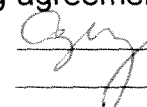
Contract Term: \_\_\_\_\_ Contract/Grant Value: \_\_\_\_\_  
Compliance with Human Resources requirements? N/A X Yes \_\_\_\_\_ No: \_\_\_\_\_  
Compliance verified by: \_\_\_\_\_

**COUNTY COUNSEL:** (Must approve all contracts and MOU's)

Approved: X Disapproved: \_\_\_\_\_ Date: 2/23/15 By:   
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
EL DORADO COUNTY COUNSEL  
2/23/15 PM 12:01

PLEASE FORWARD TO RISK MANAGEMENT. THANK YOU!

**RISK MANAGEMENT:** (All contracts and MOU's except boilerplate grant funding agreements)

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: 2/24/15 By:   
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
nothing for Risk

**OTHER APPROVAL:** (Specify department(s) participating or directly affected by this contract).

**NOTE:** Any contract that involves the development, installation, implementation, storing, retrieving, transfer, or sending of electronic information, the acquisition of software or computer related items, or any other service/item that may be IT related, especially those that involve computers and telecommunications, must be approved by IT before submission to Counsel. This also applies to any other contract that requires approval from another department.

Departments: \_\_\_\_\_  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_  
Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_ Date: \_\_\_\_\_ By: \_\_\_\_\_

Please contact Heather Longo x7373 with questions or for contract packet pick-up. Thank you!

  
CFO Review Date: 2/18/15

  
Program Manager II, Administration and Contracts Date: 2/17/15