



COMMUNITY BUSINESS DEVELOPMENT PARTNERS

MILWAUKEE COUNTY

Participation Recommendation

To be completed by project owner. Please, direct questions regarding this form to CDBP, 414-278-4851 or

cbdpcompliance@milwaukeecountywi.gov

FUNDING SOURCE

Local State Federal Grant If Federally Funded, what percentage? Federal Source of Funds: FAA FTA DOT (includes WisDOT) Other:

CONTACT INFORMATION

Contract Administrator: Eloisa Gómez Phone: 414-256-4640 Date: December 11, 2015 Email Address eloisa.gomez@ces.uwex.edu Fund: Agency: 991 Org No. 9910

PROJECT INFORMATION

Project Name: UW Extension Project No.:

Contract Scope/Project Description (attach scope/description of work or estimating sheet):

Milwaukee County partnership has held a long standing partnership with the UW System to provide educational resources to county residents, organizations, businesses, units of county government and municipalities. WI State statutes 59.56 defines this partnership. Through this arrangement, a variety of educational programs are provided in Milwaukee County through the UW Extension educators. The Professional Services Contract covers a portion of four faculty members, some support staffing, supplies, and professional development. The UW System is a not for profit entity.

Contracting Opportunities (List NAICS codes): RFP/BID will be used (Yes/No) NO Advertising Date: Bid/Proposal Due Date:

TYPE OF PROJECT

Table with 4 columns: Category, Estimated Amount, Estimated Allowance, Recommended Participation. Rows include Professional Services and Construction Related.

APPROVALS

Is county board approval required? Yes Resolution #: (attach resolution)

WAIVER REQUEST

Request for a goal of 0% requires signature of department head, a full scope of project and explanation.

Explanation: There is no subcontracting opportunity. All services will be performed by UW Extension staff.

Eloisa Gómez Signature Date 12/11/15

CBDP USE ONLY

Concur with Recommendation X, or provide the following goals: This contract is exempt from a participation goal: X Yes No

Approved: [Signature] Date: 12/11/15