

2018 CHILDREN FIRST PROGRAM PLAN

Part A: Eligible Contractor

- Wisconsin County Agency, County Department _____
- Wisconsin Tribal Agency
- Wisconsin W-2 Agency

Contractor (Administrative) Agency Name and Address:

Contract Signer's Name: _____

Contract Signer's Title: _____

Contract Signer's Email: _____

Contact Person: _____

Contact Phone: _____

Contact Email: _____

Part B: Subcontractor for Children First Case Management Services

No subcontractor proposed

Subcontractor Agency Name and Address:

Contact Person: _____

Contact Phone: _____

Contact Email: _____

Attached Subcontractor Letter of Intent or Copy of 2018 Subcontract

Attached Additional Subcontractor Letter of Intent or 2018 Subcontract

Part C: Proposed Service Area

The contractor must serve all counties/tribes specified in the proposed service area.

County/Tribe	√	Child Support Agency Letter of Support Attached
_____	_____	
_____	_____	
_____	_____	
_____	_____	

Additional Counties/Tribes and Letters of Support Attached

Part D: Background and Philosophy of the Organization

Provide a one-page summary that includes the proposer's organizational background and organizational philosophy.

Part E: Referrals from the Child Support Agency

Provide a one-page summary outlining the child support agency's prioritization of cases referred for CF services and explaining how the referrals will be made to the administering agency.

Part F: Proposed Children First Services

Provide a one-page summary that includes proposed Children First services. Include the number of participants the administering agency anticipates being able to serve and justification for the number requested.

Part G: Methodology to Identify Outcomes

Provide a one-page summary of the methodology administering agency will use to identify outcomes, including the number of participants served, number of compliant participants and their employment status, number of -noncompliant participants, and reasons for -noncompliance.

Part H: Authorized Contractor Signature:

Administering Agency Representative Title Date