## Form 1: RFGA COVER SHEET

*This cover sheet should serve as the first page of your proposal.*

**Early Childhood Mental Health Consultation Initiative**

**Response from:**

|  |  |
| --- | --- |
| *Name of organization* |  |
| *Address* |  |
| *Executive Director* |  |
| *Phone* |  |
| *Email* |  |
| *Federal employer ID #* |  |

I understand that the San Francisco Department of Early Childhood (DEC) reserves the right to modify the specifics of this application at the time of funding and/or during the contract negotiation; that a contract may be negotiated for a portion of the amount requested; and that there is no contract until a written contract has been signed by both parties and approved by all applicable City Agencies. Submission of a response signifies that the proposed services and prices are valid for 120 calendar days from the response due date and that the quoted prices are genuine and not the result of collusion or any other anti-competitive activity.

Signature of authorized representative(s):

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Title: |  |
| Signature: |  | Date: |  |
| Name: |  | Title: |  |
| Signature: |  | Date: |  |

Submit an electronic copy to DEC-ECMHC-RFGA@sfgov.org