



Sacramento  
City Unified  
School District

## SACRAMENTO CITY UNIFIED SCHOOL DISTRICT BOARD OF EDUCATION

Agenda Item# 12.1n

**Meeting Date:** December 14, 2023

**Subject:** CSPP Continued Funding Application for Fiscal Year (FY) 2024-2025

- Information Item Only
- Approval on Consent Agenda
- Conference (for discussion only)
- Conference/First Reading (Action Anticipated: \_\_\_\_\_)
- Conference/Action
- Action
- Public Hearing

**Division:** Early Learning and Care

**Recommendation:** Request to approve the submission of the Continued Funding Application (CFA) to the California Department of Education (CDE) for the California State Preschool Program (CSPP) for the fiscal year (FY) 2024-2025.

**Background/Rationale:** Contractors who currently hold a California State Preschool Program (CSPP) contract and request to be considered for continued funding for the fiscal year (FY) 2024-2025 must complete an application for continued funding.

**Financial Considerations:** SCUSD offers Full-Day/Full-Year and Part-Day/Part-Year CSPP programs throughout the city of Sacramento, which is about \$7.2 million in revenue. Applying for continued funding will provide children and families more opportunities and access to high-quality educational services.

**LCAP Goal(s):**

Goal 1: College Career Readiness

Goal 2: Foundational Educational Experience with Equitable Opportunities for ALL students

Goal 3: Integrated Supports

Goal 4: Culture and Climate – Dismantling Systems

Goal 6: Implementation of MTSS/Data-Based Decision Making

Goal 8: Basic Services and Districtwide Operations/Supports

**Documents Attached:**

1. CSPP Continued Funding Application and supporting documentation

**Estimated Time of Presentation: N/A**

**Submitted by:** Yvonne Wright, Chief Academic Officer

E'leva Hughes Gibson, Assistant Superintendent

**Approved by:** Lisa Allen, Interim Superintendent

## Fiscal Year 2024–25 CSPP Continued Funding

### Early Education Division

#### Overview

Contractors holding a current California State Preschool Program (CSPP) contract, and if applicable a Prekindergarten and Family Literacy Support (CPKS) contract, who wish to be considered for continued funding for fiscal year (FY) 2024–25 must complete this application for continued funding. The FY 2024–25 Continued Funding Application (CFA) Overview and Instructions may be accessed on the [CFA web page](#).

Contractors who apply for and are approved for continued funding do not need to sign a contract with the CDE to provide CSPP and CPKS services for FY 2024–25. Contracts will be automatically renewed in accordance with all applicable federal and state laws and Contract Terms and Conditions (CT&Cs). By signing this CFA, the contractor is indicating that it wishes to automatically renew its contract(s) for FY 2024–25 and accepts all of the terms and conditions of the 2024–25 CSPP contract, and if applicable the 2024–25 CPKS contract, which will be provided to the contractor no later than June 1, 2024.

Upon completion of this CFA, the California Department of Education (CDE) will review the application and may contact your agency seeking additional information. If the CFA is returned to the CDE in a timely manner but is not fully and accurately completed, funding for FY 2024–25, if approved, may be delayed.

Please also note that contractors have no vested right to a subsequent contract. Completion of this CFA does not guarantee a renewal of funding. If the CDE determines your agency will not be renewed for a subsequent contract year, you will be notified in writing no later than April 7, 2024, pursuant to the *California Code of Regulations*, Title 5 (5 CCR) Section 17828.

Contractors that wish to reject the terms of the FY 2024–25 CSPP and/or CPKS contract must provide the CDE with a written notice that the terms of the contract(s) are rejected by emailing [EarlyEducationContracts@cde.ca.gov](mailto:EarlyEducationContracts@cde.ca.gov) on or before June 30, 2024. The email should come from the Executive Director/Superintendent of the contracting entity or their authorized representative and state that the terms of the FY 2024–25 CSPP and, as applicable, the CPKS contract are rejected. Contractors providing such notice to the CDE of the rejection of the terms of the contract will not have a contract(s) in effect for FY 2024–25. Note that while contractors who currently receive CPKS funding may reject their 2024–25 CPKS contract, they cannot reject their 2024–25 CSPP contract and still receive funding under a CPKS contract since CPKS funding is tied to having a CSPP contract.

If a contractor wishes to terminate the contract for any reason during the FY 2024–25 contract term, the contractor shall notify the CDE of its intent to terminate the contract at least 90 calendar days in advance of contract termination and shall follow CCR 17795.

#### Instructions

Review the "Fiscal Year 2024–25 Continued Funding Application Overview and Instructions" document provided on the CFA web page for detailed instructions on how to complete each section of the CFA. All fields must be completed unless otherwise noted as optional. The application is structured into the following sections:

- Section I: Contractor Information
- Section II: Contract and Program Type
- Section III: Contractor's Officers and Board of Directors Information
- Section IV: Program Narrative
- Section V: Subcontract Certification
- Section VI: Contractor Certification
- Section VII: CFA Checklist

**Only a person with the legal authority to contractually bind the agency, or the contractor's "authorized representative" identified in the Board Resolution, may sign the CFA and related contractual documents on behalf of the agency. Please refer to the "Fiscal Year 2024–25 Continued Funding Application Overview and Instructions" and the template Board Resolution provided on the [CFA web page](#).**

If you do not complete the CFA in one session, you must select the **Save Responses** button located on the bottom of the screen. Once selected, you will be redirected to a new browser window to enter your email address. You will receive an email with a unique web address for entrance back into the CFA. It is recommended that you save the application web address. If you have any questions regarding the CFA, please contact [CFA@cde.ca.gov](mailto:CFA@cde.ca.gov).

**Section I: Contractor Information**

**Contractor Legal Name:**

Sacramento City Unified School District

**Contractor "Doing Business As" (DBA): (Optional)**

Sacramento City Unified School District

**Headquartered County:**

34 Sacramento

**Vendor Number:**

6743

**Executive Director Name:**

Lisa Allen

**Executive Director Telephone Number: (999-999-9999)**

916-643-9010

**Executive Director Email Address:**

Lisa-Allen@scusd.edu

**Legal Business Address:**

5735 47th Avenue

**City:**

Sacramento

**Zip Code:**

95824

**Is Mailing Address different from Legal Business Address?**

Yes

No

**Name of Person Completing the CFA:**

Sherrell Peterson

**Title of Person Completing the CFA:**

Child Development Program Technican

**Contact Person Telephone Number: (999-999-9999)**

916-643-7853

**Contact Person Email Address:**

Sherrell-Peterson@scusd.edu



## Section II: Contract and Program Type

### Part 1: Contract and Program Type

Check all applicable boxes indicating the programs the contractor intends to continue to administer for FY 2024–25. The contractor agrees to continue implementation of these programs with funds provided by the CDE.

**Contract Type:** *(select all that apply)*

- CSPP
- CPKS

**Does the CSPP operate a Family Childcare Home Education Network (FCHEEN)?**

- Yes
- No

**ProgramType:** *(Select all that apply. A completed Program Calendar (Form EED 9730) must be submitted. If the contractor operates both a full-day and a part-day program, a separate Program Calendar (Form EED 9730) must be uploaded for each.)*

- Full-Day/Full-Year
- Part-Day/Part-Year
- Full-Day/Part-Year
- Part-Day/Full-Year

### Part 2: Projected Enrollment

Insert the number of subsidized children your agency expects to enroll with the CSPP contract for each county services are provided, as applicable.

**How many counties does your agency operate in?**

#### County 1 Information

Select the County Name:

Number of Children to be Enrolled in Part-Day CSPP in County 1:

Number of Children to be Enrolled in Full-Day CSPP in

County 1:

Total Number of Children to be  
Enrolled in County 1:

816

**Total Number of CSPP Children to be Enrolled:** *(Add the total from each county.)*

816

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**Section III: Contractor's Officers and Board of Directors Information**

**Does the contractor have a board of directors?**

- Yes
- No

**How many officers and board members/governing individuals (i.e., owner, director, etc.) does your agency have?** *(If there are more than 10, please complete this section and email [CFA@cde.ca.gov](mailto:CFA@cde.ca.gov) with any additional members and their contact information.)*

7

**Officer #1:**

Officer 1 First Name: Chinua  
 Officer 1 Last Name: Rhodes  
 Officer 1 Title: President, Board of Education, Area 5  
 Officer 1 Telephone Number: (999-999-9999) 916-643-9314  
 Officer 1 Mailing Address: 5735 47th Avenue  
 Officer 1 Mailing City: Sacramento  
 Officer 1 Mailing Zip Code: 95824  
 Officer 1 Email Address: Chinua-Rhodes@scusd.edu

**Officer #2:**

Officer 2 First Name: Lavinia  
 Officer 2 Last Name: Grace Phillips  
 Officer 2 Title: 1st Vice President, Board of Education, Area 7  
 Officer 2 Telephone Number (999-999-9999): 916-643-9314  
 Officer 2 Mailing Address: 5735 47th Avenue  
 Officer 2 Mailing City: Sacramento  
 Officer 2 Mailing Zip Code: 95824  
 Officer 2 Email Address: Lavinia-Phillips@scusd.edu

**Officer #3:**

Officer 3 First Name: Jasjit  
 Officer 3 Last Name: Singh  
 Officer 3 Title: 2nd Vice President, Board of Education, Area 2  
 Officer 3 Telephone Number (999-999-9999): 916-643-9314  
 Officer 3 Mailing Address: 5735 47th Avenue  
 Officer 3 Mailing City: Sacramento  
 Officer 3 Mailing Zip Code: 95824  
 Officer 3 Email Address: Jasjit-Singh@scusd.edu

**Officer #4:**

Officer 4 First Name: Tara  
Officer 4 Last Name: Jeane  
Officer 4 Title: Board of Education Member, Area 1  
Officer 4 Telephone Number (999-999-9999): 916-643-9314  
Officer 4 Mailing Address: 5735 47th Avenue  
Officer 4 Mailing City: Sacramento  
Officer 4 Mailing Zip Code: 95824  
Officer 4 Email Address: Tara-Jeane@scusd.edu

**Officer #5:**

Officer 5 First Name: Christina  
Officer 5 Last Name: Pritchett  
Officer 5 Title: Board of Education Member, Area 3  
Officer 5 Telephone Number (999-999-9999): 916-643-9314  
Officer 5 Mailing Address: 5735 47th Avenue  
Officer 5 Mailing City: Sacramento  
Officer 5 Mailing Zip Code: 95824  
Officer 5 Email Address: Christina-Pritchett@scusd.edu

**Officer #6:**

Officer 6 First Name: Jamee  
Officer 6 Last Name: Villa  
Officer 6 Title: Board of Education Member, Area 4  
Officer 6 Telephone Number (999-999-9999): 916-643-9314  
Officer 6 Mailing Address: 5735 47th Avenue  
Officer 6 Mailing City: Sacramento  
Officer 6 Mailing Zip Code: 95824  
Officer 6 Email Address: Jamee-Villa@scusd.edu

**Officer #7:**

Officer 7 First Name: Taylor  
Officer 7 Last Name: Kayatta  
Officer 7 Title: Board of Education Member, Area 6  
Officer 7 Telephone Number (999-999-9999): 916-643-9314  
Officer 7 Mailing Address: 5735 47th Avenue  
Officer 7 Mailing City: Sacramento  
Officer 7 Mailing Zip Code: 95824  
Officer 7 Email Address: Taylor-Kayatta@scusd.edu

**Have any of the listed officers, board members, owners or other governing individuals ever served as an officer, board member, owner or governing individual with an agency that received state or federal funding and which agency funding was terminated or involuntarily non-renewed, or the agency was debarred from funding for any period of time?**

- Yes  
 No



## Section IV: Program Narrative

Does the contractor have program or minimum days of operation (MDO) changes?

- Yes  
 No

If the contractor does have program or MDO changes, please select the type(s) of change and complete the questions below. (Note: Making changes to the MDO does not change the contract Maximum Reimbursable Amount (MRA).

- Program change  
 MDO change

Identify the program component(s) for which you are requesting a change.

Number of children to be enrolled increased from 792 students to 816 students.

Describe how the program currently provides services to children and families in relation to the above-identified program component(s).

The program provides children access to high quality programs and equitable supports for learning and c

Describe the proposed change(s), and how services will be improved if the change(s) is/are implemented.

The proposed changes will provide children and families with more opportunities and access to high qua

**AGREEMENT:** By signing this application electronically, I, the District Superintendent, or authorized designee, agree that my electronic signature is the legally binding equivalent to my handwritten signature.

- Yes  
 No

Printed Name of the Contractor's Authorized Representative:

Dr. E'Leva Hughes-Gibson

Title of the Contractor's Authorized Representative:

Assistant Superintendent

Certification Date: (MM/DD/YYYY)

12/01/2023

## Section V: Subcontract Certification

Subcontractor refers to a separate agency subcontracted to provide CSPP services in accordance with the provisions contained in the California Education Code, 5 CCR, and the CT&Cs.

**Does the Contractor have subcontractors?**

- Yes  
 No

Contractors who subcontract CSPP services must also submit a completed Subcontractor Information Form (EED-3704B). The form is available on the [CFA web page](#).

**AGREEMENT:** By signing this application electronically, I, the District Superintendent, or authorized designee, agree that my electronic signature is the legally binding equivalent to my handwritten signature.

- Yes  
 No

**Printed Name of the Contractor's Authorized Representative:**

E'Leva Hughes Gibson

**Title of the Contractor's Authorized Representative:**

Assistant Superintendent

**Certification Date:** (MM/DD/YYYY)

12/01/2023

**Authorized Representative's Telephone Number:** (999-999-9999)

916-643-7801

**Authorized Representative's Email Address:**

Eleva-Gibson@scusd.edu

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## Section VI: Contractor Certification

**Under penalty of perjury, I certify the following statements as true and correct to the best of my knowledge:** *(Each box below must be selected in order to continue with the application.)*

- I have read and understand the staffing requirements for Program Director, Site Supervisor, and Teacher. All staff employed by the contractor for the provision of preschool services are fully qualified for their respective positions. The exception to this certification is a person employed as Program Director or Site Supervisor who possesses a current Staffing Qualifications Waiver approved by the Early Education Division.
- I am authorized by the contractor's Board of Directors or other governing authority to execute this CFA, signifying their intent to automatically renew the current CSPP contract, and CPKS contract if applicable, for FY 2024–25, under new terms and conditions to be established by the CDE, unless rejected in writing prior to the effective date of the new CSPP contract(s) on June 30, 2024.
- On behalf of the contractor and its governing authority, I understand that some information requested in this CFA is intended for use by CDE auditors in connection with future audit work and performance reviews and may not be used, reviewed, or considered by the CDE until after the contract has expired, if ever. Therefore, the contractor further understands that the information (and any underlying transactions) disclosed by this CFA shall not be considered properly noticed to the CDE, nor approved, accepted, or authorized by the CDE, even if the contractor's request for continued funding by the CDE is subsequently approved.
- The governing board members or persons with governing authority have been trained in understanding conflict of interest requirements associated with their positions on the board and have reported all known conflicts of interest.

**As the authorized representative of the CSPP contractor named in this application, I certify that:** *(Each box below must be selected in order to continue with the application.)*

- I have reviewed all of the information for my agency and, to the best of my knowledge, the information on the CDMIS website reflects accurate information for my agency as of the date this certification is signed.
- I understand my obligation as a CSPP contractor to ensure the accuracy of information in CDMIS on an ongoing basis and will update the information in CDMIS as needed throughout the contract period.

**As the signer on this CFA I have supervisory authority over the CSPP and have actual, personal knowledge of the information provided in this CFA. I am familiar with and will ensure that the contractor complies with all applicable program statutes and regulations in effect for FY 2024-25, including but not limited to:** *(Each box below must be selected in order to continue with the application.)*

- Subcontracting requirements, including competitive bidding, CDE approval, and audit requirements in 5 CCR.
- Prohibitions on conflicts of interests, including (i) the assurances required to establish that transactions with officers, directors and other related party transactions are conducted at arm's length, and (ii) employment limitations stated in EC.
- Cost reimbursement requirements, including reimbursable and non-reimbursable costs, documentation requirements, the provisions for determining the reimbursable amount and other provisions in 5 CCR, and accounting and reporting requirements in 5 CCR.
- Operational and programmatic requirements.
- Personnel requirements as stipulated in the California Education Code, 5 CCR; and the CT&Cs.

By signing this CFA, the contractor is indicating that it wishes to automatically renew the current contract for FY 2024–25 and, if approved, is willing to, and does accept, all terms and conditions of the CSPP contract, which will be provided to the contractor no later than June 1, 2024. The contractor may reject the FY 2024–25 contract by

providing the CDE with a written notice of rejection no later than June 30, 2024. Contractors that wish to reject the terms of the FY 2024–25 contract must provide written notice that the terms of the contract are rejected by emailing [EarlyEducationContracts@cde.ca.gov](mailto:EarlyEducationContracts@cde.ca.gov) on or before June 30, 2024. The email should come from the Executive Director/Superintendent of the contracting entity or their authorized representative and state that the terms of the FY 2024–25 CSPP contract, and CPKS contract if applicable, are rejected.

Contractors providing such notice to the CDE of the rejection of the terms of the contract(s) will not have a contract(s) in effect for FY 2024–25. I understand that failure to timely reject the terms of the contract means that the contract may be automatically renewed for FY 2024-25 starting on July 1, 2024.

**AGREEMENT:** By signing this application electronically, I, the District Superintendent, or authorized designee, agree that my electronic signature is the legally binding equivalent to my handwritten signature.

- Yes
- No

**Printed Name of the Contractor's Authorized Representative:**

E'Leva Hughes Gibson

**Title of the Contractor's Authorized Representative:**

Assistant Superintendent

**Certification Date:** (MM/DD/YYYY)

12/01/2023

**Authorized Representative's Telephone Number:** (999-999-9999)

916-643-7801

**Authorized Representative's Email Address:**

Eleva-Gibson@scusd.edu

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## Section VII – CFA Checklist

**Is the Contractor a public or non-public agency?** (The State Administrative Manual defines a **public agency** as any state agency, city, county, special district, school district, community college district, county superintendent of schools, or federal agency. A charter school is also a public agency. Any agency that does not meet these criteria is considered a "**non-public agency**.")

- Public Agency  
 Non-Public Agency

**Is the Contractor a community college or community college district in California?** (Community colleges and community college districts appear in the [California Community Colleges Chancellor's Office Directory](#))

- Yes  
 No

**Is the Contractor a local education agency (LEA)?** (An LEA is a local entity involved in education including but not limited to school districts, county offices of education, direct-funded charter schools, and special education local plan areas. LEAs appear in the [California School Directory](#))

- Yes  
 No

All forms and documentation listed below must be completed and attached to this application when submitting the CFA. Download, complete, and save each required attachment, as applicable, from the [CFA web page](#). Before uploading your completed attachments, they must be saved on your computer in a compressed (zipped) folder.

### Instructions for saving all attachments in a compressed (zipped) folder:

Save all completed attachments in one folder on your computer. Name each document with your Vendor ID Number followed by the title of the document, for example "12345 - STD 204," "12345 - Board Resolution," etc.

Name the folder containing all attachments with your Vendor ID Number followed by "CFA Attachments," for example "12345 - CFA Attachments."

Right click on the folder, hover your cursor over the "Send to" option, then select "Compressed (zipped) folder." (Mac users may instead select all the documents within the folder, right click, and select "Compress X items" where X is the number of items selected.) The compressed folder will appear in the same location as the original folder. The compressed folder name will end with ".zip."

### Check each box below to confirm the required item is completed and included in your zipped file:

Full-Day Calendar (Form EED 9730). Required for contractors who indicated a Full-Day program type in Section II.

Included

Part-Day Calendar (Form EED 9730). Required for contractors who indicated a Part-Day program type in Section II.

Included

California Civil Rights Laws Certification (CO-005). Required for all contractors.

Included

Contractor Certification Clauses (CCC). Required for all contractors.

Included

Federal Certification (CO.8). Required for all contractors.

*Included*

CDMIS Agency Information Certification. Required for all contractors. (Review all information in CDMIS, update any outdated or incorrect information, and generate the Agency Information Certification form. Log on to the [CDMIS](#) and follow the steps outlined in the FY 2024–25 CFA Instructions.)

*Included*

Verification of Local Education Agency Name and Address. Required for all LEAs. (Provide the information page printed from [California School Directory web page](#) or [California Community College Chancellor's Office web page](#), as applicable).

*Included*

Public Agency's Board Resolution or Minutes authorizing signature authority. Required for all Public Agencies. (If the contractor is a County Office of Education, Resolution is not required only IF the CFA is signed by the County Superintendent).

*Included*

*Not Applicable*

If applicable: Application for License Exemption. Applicable only for LEAs choosing to apply to be exempt from licensure pursuant to Health & Safety Code (H&SC) Section 1596.792(o).

*Included*

*Not Applicable*

**Upload the .zip file containing all required attachments. To upload the file, click the icon below, select the .zip folder saved on your computer, and click "upload." When the file has uploaded successfully a unique ID will appear in the box below.**



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### California State Preschool Program Fiscal Year 2024–25 Program Calendar

Contractor Name: **Sacramento City Unified School District** County: **Sacramento**

Vendor Number: **6743** Contract Type: **CSPP & CPKS** Program Type: **Full-Day**

Instructions: Check the box on each date your program will operate. Total days of operation will automatically calculate.

**July 2024 Days of Operation 22**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	1 <input checked="" type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input type="checkbox"/>
7 <input type="checkbox"/>	8 <input checked="" type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input type="checkbox"/>
14 <input type="checkbox"/>	15 <input checked="" type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input checked="" type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input type="checkbox"/>
21 <input type="checkbox"/>	22 <input checked="" type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input checked="" type="checkbox"/>	26 <input checked="" type="checkbox"/>	27 <input type="checkbox"/>
28 <input type="checkbox"/>	29 <input checked="" type="checkbox"/>	30 <input checked="" type="checkbox"/>	31 <input checked="" type="checkbox"/>	N/A	N/A	N/A

**January 2025 Days of Operation 19**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	N/A	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
5 <input type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input checked="" type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input type="checkbox"/>
12 <input type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input checked="" type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input checked="" type="checkbox"/>	18 <input type="checkbox"/>
19 <input type="checkbox"/>	20 <input type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input checked="" type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input type="checkbox"/>
26 <input type="checkbox"/>	27 <input checked="" type="checkbox"/>	28 <input checked="" type="checkbox"/>	29 <input checked="" type="checkbox"/>	30 <input checked="" type="checkbox"/>	31 <input checked="" type="checkbox"/>	N/A

**August 2024 Days of Operation 22**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	N/A	N/A	1 <input checked="" type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input type="checkbox"/>
4 <input type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input checked="" type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input type="checkbox"/>
11 <input type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input checked="" type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input type="checkbox"/>
18 <input type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input checked="" type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input type="checkbox"/>
25 <input type="checkbox"/>	26 <input checked="" type="checkbox"/>	27 <input checked="" type="checkbox"/>	28 <input checked="" type="checkbox"/>	29 <input checked="" type="checkbox"/>	30 <input checked="" type="checkbox"/>	31 <input type="checkbox"/>

**February 2025 Days of Operation 18**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	N/A	N/A	N/A	N/A	1 <input type="checkbox"/>
2 <input type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input type="checkbox"/>
9 <input type="checkbox"/>	10 <input type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input type="checkbox"/>
16 <input type="checkbox"/>	17 <input type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input type="checkbox"/>
23 <input type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input checked="" type="checkbox"/>	26 <input checked="" type="checkbox"/>	27 <input checked="" type="checkbox"/>	28 <input checked="" type="checkbox"/>	N/A

**September 2024 Days of Operation 20**

SUN	MON	TUE	WED	THU	FRI	SAT
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input type="checkbox"/>
8 <input type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input type="checkbox"/>
15 <input type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input checked="" type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input type="checkbox"/>
22 <input type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input checked="" type="checkbox"/>	26 <input checked="" type="checkbox"/>	27 <input checked="" type="checkbox"/>	28 <input type="checkbox"/>
29 <input type="checkbox"/>	30 <input checked="" type="checkbox"/>	N/A	N/A	N/A	N/A	N/A

**March 2025 Days of Operation 21**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	N/A	N/A	N/A	N/A	1 <input type="checkbox"/>
2 <input type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input type="checkbox"/>
9 <input type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input type="checkbox"/>
16 <input type="checkbox"/>	17 <input checked="" type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input type="checkbox"/>
23 <input type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input checked="" type="checkbox"/>	26 <input checked="" type="checkbox"/>	27 <input checked="" type="checkbox"/>	28 <input checked="" type="checkbox"/>	29 <input type="checkbox"/>
30 <input type="checkbox"/>	31 <input checked="" type="checkbox"/>	N/A	N/A	N/A	N/A	N/A

**October 2024 Days of Operation 23**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	1 <input checked="" type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input type="checkbox"/>
6 <input type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input checked="" type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input type="checkbox"/>
13 <input type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input checked="" type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input checked="" type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input type="checkbox"/>
20 <input type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input checked="" type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input checked="" type="checkbox"/>	26 <input type="checkbox"/>
27 <input type="checkbox"/>	28 <input checked="" type="checkbox"/>	29 <input checked="" type="checkbox"/>	30 <input checked="" type="checkbox"/>	31 <input checked="" type="checkbox"/>	N/A	N/A

**April 2025 Days of Operation 20**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	1 <input checked="" type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input type="checkbox"/>
6 <input type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input checked="" type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input type="checkbox"/>
13 <input type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input checked="" type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input type="checkbox"/>	18 <input type="checkbox"/>	19 <input type="checkbox"/>
20 <input type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input checked="" type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input checked="" type="checkbox"/>	26 <input type="checkbox"/>
27 <input type="checkbox"/>	28 <input checked="" type="checkbox"/>	29 <input checked="" type="checkbox"/>	30 <input checked="" type="checkbox"/>	N/A	N/A	N/A

**November 2024 Days of Operation 15**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	N/A	N/A	N/A	1 <input checked="" type="checkbox"/>	2 <input type="checkbox"/>
3 <input type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input checked="" type="checkbox"/>	9 <input type="checkbox"/>
10 <input type="checkbox"/>	11 <input type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input checked="" type="checkbox"/>	16 <input type="checkbox"/>
17 <input type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input checked="" type="checkbox"/>	23 <input type="checkbox"/>
24 <input type="checkbox"/>	25 <input type="checkbox"/>	26 <input type="checkbox"/>	27 <input type="checkbox"/>	28 <input type="checkbox"/>	29 <input type="checkbox"/>	30 <input type="checkbox"/>

**May 2025 Days of Operation 21**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	N/A	N/A	1 <input checked="" type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input type="checkbox"/>
4 <input type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input checked="" type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input type="checkbox"/>
11 <input type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input checked="" type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input type="checkbox"/>
18 <input type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input checked="" type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input type="checkbox"/>
25 <input type="checkbox"/>	26 <input type="checkbox"/>	27 <input checked="" type="checkbox"/>	28 <input checked="" type="checkbox"/>	29 <input checked="" type="checkbox"/>	30 <input checked="" type="checkbox"/>	31 <input type="checkbox"/>

**December 2024 Days of Operation 15**

SUN	MON	TUE	WED	THU	FRI	SAT
1 <input type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input type="checkbox"/>
8 <input type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input type="checkbox"/>
15 <input type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input checked="" type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input type="checkbox"/>
22 <input type="checkbox"/>	23 <input type="checkbox"/>	24 <input type="checkbox"/>	25 <input type="checkbox"/>	26 <input type="checkbox"/>	27 <input type="checkbox"/>	28 <input type="checkbox"/>
29 <input type="checkbox"/>	30 <input type="checkbox"/>	31 <input type="checkbox"/>	N/A	N/A	N/A	N/A

**June 2025 Days of Operation 20**

SUN	MON	TUE	WED	THU	FRI	SAT
1 <input type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input type="checkbox"/>
8 <input type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input type="checkbox"/>
15 <input type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input checked="" type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input type="checkbox"/>
22 <input type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input checked="" type="checkbox"/>	26 <input checked="" type="checkbox"/>	27 <input checked="" type="checkbox"/>	28 <input type="checkbox"/>
29 <input type="checkbox"/>	30 <input checked="" type="checkbox"/>	N/A	N/A	N/A	N/A	N/A

**Total Days of Operation: 236**

EED Consultant Initials (For EED Use Only)  
Date Approved by EED (For EED Use Only)

### California State Preschool Program Fiscal Year 2024–25 Program Calendar

Contractor Name: **Sacramento City Unified School District**

County: **Sacramento**

Vendor Number: **6743**

Contract Type: **CSPP & CPKS** Program Type: **Part-Day**

Instructions: Check the box on each date your program will operate. Total days of operation will automatically calculate.

**July 2024 Days of Operation 0**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>
7 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>	10 <input type="checkbox"/>	11 <input type="checkbox"/>	12 <input type="checkbox"/>	13 <input type="checkbox"/>
14 <input type="checkbox"/>	15 <input type="checkbox"/>	16 <input type="checkbox"/>	17 <input type="checkbox"/>	18 <input type="checkbox"/>	19 <input type="checkbox"/>	20 <input type="checkbox"/>
21 <input type="checkbox"/>	22 <input type="checkbox"/>	23 <input type="checkbox"/>	24 <input type="checkbox"/>	25 <input type="checkbox"/>	26 <input type="checkbox"/>	27 <input type="checkbox"/>
28 <input type="checkbox"/>	29 <input type="checkbox"/>	30 <input type="checkbox"/>	31 <input type="checkbox"/>	N/A	N/A	N/A

**January 2025 Days of Operation 19**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	N/A	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
5 <input type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input checked="" type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input type="checkbox"/>
12 <input type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input checked="" type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input checked="" type="checkbox"/>	18 <input type="checkbox"/>
19 <input type="checkbox"/>	20 <input type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input checked="" type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input type="checkbox"/>
26 <input type="checkbox"/>	27 <input checked="" type="checkbox"/>	28 <input checked="" type="checkbox"/>	29 <input checked="" type="checkbox"/>	30 <input checked="" type="checkbox"/>	31 <input checked="" type="checkbox"/>	N/A

**August 2024 Days of Operation 0**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	N/A	N/A	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	8 <input type="checkbox"/>	9 <input type="checkbox"/>	10 <input type="checkbox"/>
11 <input type="checkbox"/>	12 <input type="checkbox"/>	13 <input type="checkbox"/>	14 <input type="checkbox"/>	15 <input type="checkbox"/>	16 <input type="checkbox"/>	17 <input type="checkbox"/>
18 <input type="checkbox"/>	19 <input type="checkbox"/>	20 <input type="checkbox"/>	21 <input type="checkbox"/>	22 <input type="checkbox"/>	23 <input type="checkbox"/>	24 <input type="checkbox"/>
25 <input type="checkbox"/>	26 <input type="checkbox"/>	27 <input type="checkbox"/>	28 <input type="checkbox"/>	29 <input type="checkbox"/>	30 <input type="checkbox"/>	31 <input type="checkbox"/>

**February 2025 Days of Operation 18**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	N/A	N/A	N/A	N/A	1 <input type="checkbox"/>
2 <input type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input type="checkbox"/>
9 <input type="checkbox"/>	10 <input type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input type="checkbox"/>
16 <input type="checkbox"/>	17 <input type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input type="checkbox"/>
23 <input type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input checked="" type="checkbox"/>	26 <input checked="" type="checkbox"/>	27 <input checked="" type="checkbox"/>	28 <input checked="" type="checkbox"/>	N/A

**September 2024 Days of Operation 20**

SUN	MON	TUE	WED	THU	FRI	SAT
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input type="checkbox"/>
8 <input type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input type="checkbox"/>
15 <input type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input checked="" type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input type="checkbox"/>
22 <input type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input checked="" type="checkbox"/>	26 <input checked="" type="checkbox"/>	27 <input checked="" type="checkbox"/>	28 <input type="checkbox"/>
29 <input type="checkbox"/>	30 <input checked="" type="checkbox"/>	N/A	N/A	N/A	N/A	N/A

**March 2025 Days of Operation 21**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	N/A	N/A	N/A	N/A	1 <input type="checkbox"/>
2 <input type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input type="checkbox"/>
9 <input type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input type="checkbox"/>
16 <input type="checkbox"/>	17 <input checked="" type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input type="checkbox"/>
23 <input type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input checked="" type="checkbox"/>	26 <input checked="" type="checkbox"/>	27 <input checked="" type="checkbox"/>	28 <input checked="" type="checkbox"/>	29 <input type="checkbox"/>
30 <input type="checkbox"/>	31 <input checked="" type="checkbox"/>	N/A	N/A	N/A	N/A	N/A

**October 2024 Days of Operation 23**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	1 <input checked="" type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input type="checkbox"/>
6 <input type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input checked="" type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input type="checkbox"/>
13 <input type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input checked="" type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input checked="" type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input type="checkbox"/>
20 <input type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input checked="" type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input checked="" type="checkbox"/>	26 <input type="checkbox"/>
27 <input type="checkbox"/>	28 <input checked="" type="checkbox"/>	29 <input checked="" type="checkbox"/>	30 <input checked="" type="checkbox"/>	31 <input checked="" type="checkbox"/>	N/A	N/A

**April 2025 Days of Operation 17**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	1 <input checked="" type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input type="checkbox"/>
6 <input type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input checked="" type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input type="checkbox"/>
13 <input type="checkbox"/>	14 <input type="checkbox"/>	15 <input type="checkbox"/>	16 <input type="checkbox"/>	17 <input type="checkbox"/>	18 <input type="checkbox"/>	19 <input type="checkbox"/>
20 <input type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input checked="" type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input checked="" type="checkbox"/>	25 <input checked="" type="checkbox"/>	26 <input type="checkbox"/>
27 <input type="checkbox"/>	28 <input checked="" type="checkbox"/>	29 <input checked="" type="checkbox"/>	30 <input checked="" type="checkbox"/>	N/A	N/A	N/A

**November 2024 Days of Operation 15**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	N/A	N/A	N/A	1 <input checked="" type="checkbox"/>	2 <input type="checkbox"/>
3 <input type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input checked="" type="checkbox"/>	9 <input type="checkbox"/>
10 <input type="checkbox"/>	11 <input type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input checked="" type="checkbox"/>	16 <input type="checkbox"/>
17 <input type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input checked="" type="checkbox"/>	23 <input type="checkbox"/>
24 <input type="checkbox"/>	25 <input type="checkbox"/>	26 <input type="checkbox"/>	27 <input type="checkbox"/>	28 <input type="checkbox"/>	29 <input type="checkbox"/>	30 <input type="checkbox"/>

**May 2025 Days of Operation 21**

SUN	MON	TUE	WED	THU	FRI	SAT
N/A	N/A	N/A	N/A	1 <input checked="" type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input type="checkbox"/>
4 <input type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input checked="" type="checkbox"/>	8 <input checked="" type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input type="checkbox"/>
11 <input type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input checked="" type="checkbox"/>	15 <input checked="" type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input type="checkbox"/>
18 <input type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input checked="" type="checkbox"/>	22 <input checked="" type="checkbox"/>	23 <input checked="" type="checkbox"/>	24 <input type="checkbox"/>
25 <input type="checkbox"/>	26 <input type="checkbox"/>	27 <input checked="" type="checkbox"/>	28 <input checked="" type="checkbox"/>	29 <input checked="" type="checkbox"/>	30 <input checked="" type="checkbox"/>	31 <input type="checkbox"/>

**December 2024 Days of Operation 15**

SUN	MON	TUE	WED	THU	FRI	SAT
1 <input type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input type="checkbox"/>
8 <input type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input checked="" type="checkbox"/>	14 <input type="checkbox"/>
15 <input type="checkbox"/>	16 <input checked="" type="checkbox"/>	17 <input checked="" type="checkbox"/>	18 <input checked="" type="checkbox"/>	19 <input checked="" type="checkbox"/>	20 <input checked="" type="checkbox"/>	21 <input type="checkbox"/>
22 <input type="checkbox"/>	23 <input type="checkbox"/>	24 <input type="checkbox"/>	25 <input type="checkbox"/>	26 <input type="checkbox"/>	27 <input type="checkbox"/>	28 <input type="checkbox"/>
29 <input type="checkbox"/>	30 <input type="checkbox"/>	31 <input type="checkbox"/>	N/A	N/A	N/A	N/A

**June 2025 Days of Operation 9**

SUN	MON	TUE	WED	THU	FRI	SAT
1 <input type="checkbox"/>	2 <input checked="" type="checkbox"/>	3 <input checked="" type="checkbox"/>	4 <input checked="" type="checkbox"/>	5 <input checked="" type="checkbox"/>	6 <input checked="" type="checkbox"/>	7 <input type="checkbox"/>
8 <input type="checkbox"/>	9 <input checked="" type="checkbox"/>	10 <input checked="" type="checkbox"/>	11 <input checked="" type="checkbox"/>	12 <input checked="" type="checkbox"/>	13 <input type="checkbox"/>	14 <input type="checkbox"/>
15 <input type="checkbox"/>	16 <input type="checkbox"/>	17 <input type="checkbox"/>	18 <input type="checkbox"/>	19 <input type="checkbox"/>	20 <input type="checkbox"/>	21 <input type="checkbox"/>
22 <input type="checkbox"/>	23 <input type="checkbox"/>	24 <input type="checkbox"/>	25 <input type="checkbox"/>	26 <input type="checkbox"/>	27 <input type="checkbox"/>	28 <input type="checkbox"/>
29 <input type="checkbox"/>	30 <input type="checkbox"/>	N/A	N/A	N/A	N/A	N/A

**Total Days of Operation: 178**

EED Consultant Initials (For EED Use Only)  
Date Approved by EED (For EED Use Only)



## CALIFORNIA CIVIL RIGHTS LAWS CERTIFICATION

Pursuant to Public Contract Code section 2010, if a bidder or proposer executes or renews a contract in the amount of \$100,000 or more on or after January 1, 2017, the bidder or proposer hereby certifies compliance with the following:

1. CALIFORNIA CIVIL RIGHTS LAWS: For contracts \$100,000 or more, executed or renewed after January 1, 2017, the contractor certifies compliance with the Unruh Civil Rights Act (Section 51 of the Civil Code) and the Fair Employment and Housing Act (Section 12960 of the Government Code); and
2. EMPLOYER DISCRIMINATORY POLICIES: For contracts \$100,000 or more, executed or renewed after January 1, 2017, if a Contractor has an internal policy against a sovereign nation or peoples recognized by the United States government, the Contractor certifies that such policies are not used in violation of the Unruh Civil Rights Act (Section 51 of the Civil Code) or the Fair Employment and Housing Act (Section 12960 of the Government Code).

## CERTIFICATION

I, the official named below, certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

1. Proposer/Bidder Firm Name (Printed):  
Sacramento City Unified School District

2. Federal ID Number:  
94-6002491

3. By (Authorized Signature):



4. Printed Name and Title of Person Signing:  
Dr. E'Leva Hughes-Gibson, Assistant Superintendent

5. Date Executed:  
12/01/2023

6. Executed in the County and State of:  
Sacramento, California

# Contractor Certification Clauses

CCC 04/2017

## CERTIFICATION

I, the official named below, CERTIFY UNDER PENALTY OF PERJURY that I am duly authorized to legally bind the prospective Contractor to the clause(s) listed below. This certification is made under the laws of the State of California.

Contractor/Bidder Firm Name (Printed)	Federal ID Number
Sacramento City Unified School District	94-6002491

By (Authorized Signature)



Printed Name and Title of Person Signing

Dr. E'Leva Hughes-Gibson, Assistant Superintendent

Date Executed	Executed in the County of
12/01/2023	Sacramento

## CONTRACTOR CERTIFICATION CLAUSES

1. STATEMENT OF COMPLIANCE: Contractor has, unless exempted, complied with the nondiscrimination program requirements. (Gov. Code §12990 (a-f) and CCR, Title 2, Section 11102) (Not applicable to public entities.)

2. DRUG-FREE WORKPLACE REQUIREMENTS: Contractor will comply with the requirements of the Drug-Free Workplace Act of 1990 and will provide a drug-free workplace by taking the following actions:

a. Publish a statement notifying employees that unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited and specifying actions to be taken against employees for violations.

b. Establish a Drug-Free Awareness Program to inform employees about:

- 1) the dangers of drug abuse in the workplace;
- 2) the person's or organization's policy of maintaining a drug-free workplace;
- 3) any available counseling, rehabilitation and employee assistance programs; and,
- 4) penalties that may be imposed upon employees for drug abuse violations.

c. Every employee who works on the proposed Agreement will:

- 1) receive a copy of the company's drug-free workplace policy statement; and,

2) agree to abide by the terms of the company's statement as a condition of employment on the Agreement.

Failure to comply with these requirements may result in suspension of payments under the Agreement or termination of the Agreement or both and Contractor may be ineligible for award of any future State agreements if the department determines that any of the following has occurred: the Contractor has made false certification, or violated the certification by failing to carry out the requirements as noted above. (Gov. Code §8350 et seq.)

3. NATIONAL LABOR RELATIONS BOARD CERTIFICATION: Contractor certifies that no more than one (1) final unappealable finding of contempt of court by a Federal court has been issued against Contractor within the immediately preceding two-year period because of Contractor's failure to comply with an order of a Federal court, which orders Contractor to comply with an order of the National Labor Relations Board. (Pub. Contract Code §10296) (Not applicable to public entities.)

4. CONTRACTS FOR LEGAL SERVICES \$50,000 OR MORE- PRO BONO REQUIREMENT: Contractor hereby certifies that Contractor will comply with the requirements of Section 6072 of the Business and Professions Code, effective January 1, 2003.

Contractor agrees to make a good faith effort to provide a minimum number of hours of pro bono legal services during each year of the contract equal to the lessor of 30 multiplied by the number of full time attorneys in the firm's offices in the State, with the number of hours prorated on an actual day basis for any contract period of less than a full year or 10% of its contract with the State.

Failure to make a good faith effort may be cause for non-renewal of a state contract for legal services, and may be taken into account when determining the award of future contracts with the State for legal services.

5. EXPATRIATE CORPORATIONS: Contractor hereby declares that it is not an expatriate corporation or subsidiary of an expatriate corporation within the meaning of Public Contract Code Section 10286 and 10286.1, and is eligible to contract with the State of California.

6. SWEATFREE CODE OF CONDUCT:

a. All Contractors contracting for the procurement or laundering of apparel, garments or corresponding accessories, or the procurement of equipment, materials, or supplies, other than procurement related to a public works contract, declare under penalty of perjury that no apparel, garments or corresponding accessories, equipment, materials, or supplies furnished to the state pursuant to the contract have been laundered or produced in whole or in part by sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor, or with the benefit of sweatshop labor, forced labor, convict labor, indentured labor under penal sanction, abusive forms of child labor or exploitation of children in sweatshop labor. The contractor further declares under penalty of perjury that they adhere to the Sweatfree Code of Conduct as set forth on the California Department of Industrial Relations website located at [www.dir.ca.gov](http://www.dir.ca.gov), and Public Contract Code Section 6108.

b. The contractor agrees to cooperate fully in providing reasonable access to the contractor's records, documents, agents or employees, or premises if reasonably

required by authorized officials of the contracting agency, the Department of Industrial Relations, or the Department of Justice to determine the contractor's compliance with the requirements under paragraph (a).

7. DOMESTIC PARTNERS: For contracts of \$100,000 or more, Contractor certifies that Contractor is in compliance with Public Contract Code section 10295.3.

8. GENDER IDENTITY: For contracts of \$100,000 or more, Contractor certifies that Contractor is in compliance with Public Contract Code section 10295.35.

## **DOING BUSINESS WITH THE STATE OF CALIFORNIA**

The following laws apply to persons or entities doing business with the State of California.

1. CONFLICT OF INTEREST: Contractor needs to be aware of the following provisions regarding current or former state employees. If Contractor has any questions on the status of any person rendering services or involved with the Agreement, the awarding agency must be contacted immediately for clarification.

Current State Employees (Pub. Contract Code §10410):

- 1). No officer or employee shall engage in any employment, activity or enterprise from which the officer or employee receives compensation or has a financial interest and which is sponsored or funded by any state agency, unless the employment, activity or enterprise is required as a condition of regular state employment.
- 2). No officer or employee shall contract on his or her own behalf as an independent contractor with any state agency to provide goods or services.

Former State Employees (Pub. Contract Code §10411):

- 1). For the two-year period from the date he or she left state employment, no former state officer or employee may enter into a contract in which he or she engaged in any of the negotiations, transactions, planning, arrangements or any part of the decision-making process relevant to the contract while employed in any capacity by any state agency.
- 2). For the twelve-month period from the date he or she left state employment, no former state officer or employee may enter into a contract with any state agency if he or she was employed by that state agency in a policy-making position in the same general subject area as the proposed contract within the 12-month period prior to his or her leaving state service.

If Contractor violates any provisions of above paragraphs, such action by Contractor shall render this Agreement void. (Pub. Contract Code §10420)

Members of boards and commissions are exempt from this section if they do not receive payment other than payment of each meeting of the board or commission, payment for preparatory time and payment for per diem. (Pub. Contract Code §10430 (e))

2. LABOR CODE/WORKERS' COMPENSATION: Contractor needs to be aware of the provisions which require every employer to be insured against liability for Worker's Compensation or to undertake self-insurance in accordance with the provisions, and

Contractor affirms to comply with such provisions before commencing the performance of the work of this Agreement. (Labor Code Section 3700)

3. AMERICANS WITH DISABILITIES ACT: Contractor assures the State that it complies with the Americans with Disabilities Act (ADA) of 1990, which prohibits discrimination on the basis of disability, as well as all applicable regulations and guidelines issued pursuant to the ADA. (42 U.S.C. 12101 et seq.)

4. CONTRACTOR NAME CHANGE: An amendment is required to change the Contractor's name as listed on this Agreement. Upon receipt of legal documentation of the name change the State will process the amendment. Payment of invoices presented with a new name cannot be paid prior to approval of said amendment.

5. CORPORATE QUALIFICATIONS TO DO BUSINESS IN CALIFORNIA:

a. When agreements are to be performed in the state by corporations, the contracting agencies will be verifying that the contractor is currently qualified to do business in California in order to ensure that all obligations due to the state are fulfilled.

b. "Doing business" is defined in R&TC Section 23101 as actively engaging in any transaction for the purpose of financial or pecuniary gain or profit. Although there are some statutory exceptions to taxation, rarely will a corporate contractor performing within the state not be subject to the franchise tax.

c. Both domestic and foreign corporations (those incorporated outside of California) must be in good standing in order to be qualified to do business in California. Agencies will determine whether a corporation is in good standing by calling the Office of the Secretary of State.

6. RESOLUTION: A county, city, district, or other local public body must provide the State with a copy of a resolution, order, motion, or ordinance of the local governing body which by law has authority to enter into an agreement, authorizing execution of the agreement.

7. AIR OR WATER POLLUTION VIOLATION: Under the State laws, the Contractor shall not be: (1) in violation of any order or resolution not subject to review promulgated by the State Air Resources Board or an air pollution control district; (2) subject to cease and desist order not subject to review issued pursuant to Section 13301 of the Water Code for violation of waste discharge requirements or discharge prohibitions; or (3) finally determined to be in violation of provisions of federal law relating to air or water pollution.

8. PAYEE DATA RECORD FORM STD. 204: This form must be completed by all contractors that are not another state agency or other governmental entity.

# FEDERAL CERTIFICATIONS

CO.8 (REV.06/20)

California Department of Education

## CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 45 CFR Part 93, "New restrictions on Lobbying," and 45 CFR Part 76, "Government-wide Debarment and Suspension (Non procurement) and Government-wide requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Education determines to award the covered transaction, grant, or cooperative agreement.

### 1. LOBBYING

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 45 CFR Part 93, for persons entering into a grant or cooperative agreement over \$100,000 as defined at 45 CFR Part 93, Sections 93.105 and 93.110, the applicant certifies that:

- (a) No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a member of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement;
- (b) If any funds other than federal appropriated funds have been or will be paid to any person for influencing or attempting to influence an employee of Congress, or any employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form -LLL, "Disclosure Form to Report Lobbying," in accordance with this instruction;
- (c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all subrecipients shall certify and disclose accordingly.

### 2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS

As required by executive Order 12549, Debarment and Suspension, and other responsibilities implemented at 45 CFR Part 76, for prospective participants in primary or a lower tier covered transactions, as defined at 45 CFR Part 76, Sections 76.105 and 76.110.

A. The applicant certifies that it and its principals:

- (a) Are not presently debarred, suspended proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction violation of federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (federal, state, or local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification; and

(d) Have not within a three-year period preceding this application had one or more public transactions (federal, state, or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

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### 3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 45 CFR Part 76, Subpart F, for grantees, as defined at 45 CFR Part 76, Sections 76.605 and 76.610-

A. The applicant certifies that it will or will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

(b) Establishing an on-going drug-free awareness program to inform employees about-

(1) The danger of drug abuse in the workplace;

(2) The grantee's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in performance of the grant be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will -

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation;

(e) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d) (2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title,

to: Director, Grants, and Contracts Service, U.S. Department of Education, 400 Maryland Avenue, S.W., (Room 3124, GSA Regional Office Building No. 3), Washington, DC 20202-4571.

Notice shall include the identification number(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d) (2), with respect to any employee who is so convicted:

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a federal, state, or local health, law enforcement, or other appropriate agency:

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

B. The grantee shall insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, state, zip code)

5735 47th Avenue  
Sacramento, Sacramento County, California,  
95824

Check if there are workplaces on file that are not identified here.

**DRUG-FREE WORKPLACE  
(GRANTEES WHO ARE INDIVIDUALS)**

As required by the Drug-Free Workplace Act of 1988, and implemented at 45 CFR Part 76, Subpart F, for grantees, as defined at 45 CFR Part 76, Sections 76.605 and 76.610-

- a. As a condition of the grant, I certify that I will not engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conducting any activity with the grant, and
- b. If convicted of a criminal drug offense resulting from a violation occurring during the conduct of any grant activity, I will report the conviction, in writing, within 10 calendar days of the conviction, to: Director, Grants and contracts Service, U.S. department of Education, 400 Maryland Avenue, S.W. (Room 3124, GSA Regional Office Building No. 3) Washington, DC 20202-4571. Notice shall include the identification numbers(s) of each affected grant.

**ENVIRONMENTAL TOBACCO SMOKE ACT**

As required by the Pro-Children Act of 1994, (also known as Environmental Tobacco Smoke), and implemented at Public Law 103-277, Part C requires that:

The applicant certifies that smoking is not permitted in any portion of any indoor facility owned or leased or contracted and used routinely or regularly for the provision of health care services, day care, and education to children under the age of 18. Failure to comply with the provisions of this law may result in the imposition of a civil monetary penalty of up to \$1,000 per day. (The law does not apply to children's services provided in private residence, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for in-patient drug and alcohol treatment.)

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As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

FISCAL YEAR 2024-25

CONTRACTOR NAME

**Sacramento City Unified Sch**

VENDOR ID NUMBER

**6743**

PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE

**Dr. E'Leva Hughes-Gibson, Assistant Superintende**

SIGNATURE



DATE

12/1/23



# Child Development Division Agency Information Certification

I certify, as the authorized representative of the agency listed below, I have reviewed all the information for and updates, additions, or deletions have been submitted as needed for information in all of the areas below:

- Executive Director/Superintendent information
- Program Director information
- Sites and Licenses and/or Office information
- Family Child Care Home summary information

To the best of my knowledge, the information on the CDMIS Web site reflects accurate information for as of the date this certification was signed.



11/30/2023

Program Director/Authorized Representative Signature

Date Signed

E'leva Gibson

Printed Name of Program Director/Authorized Representative

**Name of Agency User Generating Certification:** May Song

**Date Generated:** 11/30/2023

**Assigned CDD Consultant:** Cassandra Lewis

# EED Contractor Data Sheet

Agency Name: Sacramento City Unif Sch Dist County: Sacramento

Vendor Number: 6743 Assigned Consultant: Cassandra Lewis

**Headquarters Address**  
 Mailing Address:  
 Street Address: 5735 47th Avenue  
 City: Sacramento  
 State: CA  
 Zip: 95824-4528

**Executive Director and Contact Information**  
 Name: Ms. Lisa Allen  
 Title: Superintendent  
 EMail: Lisa-Allen@scusd.edu  
 Phone: (916)643-9010  
 FAX: (916)399-2058

**Program Director Information:**

<b>Name:</b>	<b>Contact Information:</b>	<b>Address:</b>
E'Leva Gibson	Phone: (916)643-7801 FAX: ()- Email: eleva-gibson@scusd.edu	5735 47th Ave Sacramento, CA 95824

**Contract Information:**

Contract #	MRA	Program Director
CCTR3220	\$1,186,006.00	E'Leva Gibson
CSPP3406	\$7,204,464.00	E'Leva Gibson

# EED Contractor Data Sheet

## Site

## Site and Office Information

Abraham Lincoln Preschool  
3324 Glenmoor Drive  
Sacramento, CA 95827-

Kin Do, Site Supervisor  
(916)395-4503

License Type	License #	Hours of Operation	Capacity
Day Care Center	343607946	8:00 am - 11:00 am	25

Bear Flag Children's Center  
6620 Gloria Drive  
Sacramento, CA 95831-

Melanie Lor, Site Supervisor  
(916)433-2747

License Type	License #	Hours of Operation	Capacity
Day Care Center	343605816	8:00 am - 11:00 am	24

Bowling Green Chacon Preschool  
6807 Franklin Blvd  
Sacramento, CA 95823-

Yvette Martinez, Site Supervisor  
(916)395-5217

License Type	License #	Hours of Operation	Capacity
Day Care Center	343604980	12:00 pm - 3:00 pm	24

Bowling Green McCoy Preschool  
4211 Turnbridge Drive  
Sacramento, CA 95823

Cathy Vo, Site Supervisor  
(916)395-5213

License Type	License #	Hours of Operation	Capacity
Day Care Center	343617697	8:00 am - 11:00 am	28

Camellia Preschool  
6600 Cougar Drive  
Sacramento, CA 95828

Reena Sharma, Site Supervisor  
(916)395-4522

License Type	License #	Hours of Operation	Capacity
Day Care Center	343616702	8:00 am - 11:00 am	25

# EED Contractor Data Sheet

**Site**

Earl Warren Preschool  
 5420 Lowell Street  
 Sacramento, CA 95820-

Suzanna Saraba, Site Supervisor  
 (916)395-4547

License Type	License #	Hours of Operation	Capacity
Day Care Center	340317946	8:00 am - 2:30 pm	48

Edward Kemble Preschool  
 7495 29th Street  
 Sacramento, CA 95822-

Chao Xiong, Site Supervisor  
 (916)395-4554

License Type	License #	Hours of Operation	Capacity
Day Care Center	340317944	8:00 am - 3:30 pm	48

Elder Creek Children's Center  
 7800 Lemon Hill Avenue  
 Sacramento, CA 95824-

Irina Zolnikov, Site Supervisor  
 (916)395-5231

License Type	License #	Hours of Operation	Capacity
Day Care Center	340306416	8:00 am - 3:00 pm	101

Ethel I. Baker  
 5717 Laurine Way  
 Sacramento, CA 95824

Sia Lor, Site Supervisor  
 (916)395-4562

License Type	License #	Hours of Operation	Capacity
Day Care Center	340316146	8:00 am - 11:00 am	24

Ethel Phillips Preschool  
 2930 21st Avenue  
 Sacramento, CA 95820

Christina Alva, Site Supervisor  
 (916)395-4568

License Type	License #	Hours of Operation	Capacity
Day Care Center	340317948	8:00 am - 2:30 pm	50

# EED Contractor Data Sheet

**Site**

Fr. Keith B. Kenny Preschool  
 3525 Martin Luther King Blvd  
 Sacramento, CA 95817

Denise Richardson, Site Supervisor  
 (916)395-4572

License Type	License #	Hours of Operation	Capacity
Day Care Center	340321340	8:00 am - 11:00 am	30

Golden Empire Preschool  
 9045 Canberra Drive  
 Sacramento, CA 95826

Maria Avetisov, Site Supervisor  
 (916)395-4582

License Type	License #	Hours of Operation	Capacity
Day Care Center	343609470	8:00 am - 11:00 am	24

H.W. Harkness Preschool  
 2147 54th Avenue  
 Sacramento, CA 95822-

Diana Franco, Site Supervisor  
 (916)395-4588

License Type	License #	Hours of Operation	Capacity
Day Care Center	340317920	8:45 am - 11:45 am	24

Hiram Johnson Center  
 3535 65th Street  
 Sacramento, CA 95820-

Suzie Vang, Site Supervisor  
 (916)395-5500

License Type	License #	Hours of Operation	Capacity
Day Care Center	343606947	8:00 am - 3:00 pm	73

James Marshall State Preschool  
 9525 Goethe Road  
 Sacramento, CA 95827-

Roxanne Sjolund, Site Supervisor  
 (916)395-4607

License Type	License #	Hours of Operation	Capacity
Day Care Center	343601824	8:00 am - 11:00 am	24

# EED Contractor Data Sheet

**Site**

John Bidwell Preschool  
 1730 65th Avenue  
 Sacramento, CA 95822-

Charlotte Bier, Site Supervisor  
 (916)395-4612

License Type	License #	Hours of Operation	Capacity
Day Care Center	340317924	8:00 am - 2:30 pm	48

John Cabrillo Preschool  
 1141 Seamas Ave  
 Sacramento, CA 95822

Victoria Buckingham, Site Supervisor  
 (916)395-4617

License Type	License #	Hours of Operation	Capacity
Day Care Center	343606949	8:00 am - 4:00 pm	24

John Sloat Preschool  
 7525 Candlewood Wy  
 Sacramento, CA 95822-

Sarah Wong, Site Supervisor  
 (916)395-4622

License Type	License #	Hours of Operation	Capacity
Day Care Center	340319040	8:30 am - 11:30 am	24

John Still Preschool  
 2200 John Still Drive  
 Sacramento, CA 95832

Yolanda Padilla, Site Supervisor  
 (916)395-4627

License Type	License #	Hours of Operation	Capacity
Day Care Center	343617323	8:00 am - 11:00 am	30

Leatata Floyd Preschool  
 401 McClatchy Way  
 Sacramento, CA 95818

Raman Clar, Site Supervisor  
 (916)395-4632

License Type	License #	Hours of Operation	Capacity
Day Care Center	340317922	8:30 am - 11:30 am	60

# EED Contractor Data Sheet

**Site**

Lisbon Early Learning Center  
 7555 S. Land Park Drive  
 Sacramento, CA 95831

Roseline Vincent, Site Supervisor  
 (916)433-5060

License Type	License #	Hours of Operation	Capacity
Day Care Center	343616445	8:30 am - 11:30 am	30

Martin Luther King Jr. PS  
 480 Little River Way  
 Sacramento, CA 95831

Ha Ta, Site Supervisor  
 (916)395-4649

License Type	License #	Hours of Operation	Capacity
Day Care Center	343617689	8:00 am - 11:00 am	25
School-Age Center	EXEMPT	7:00 am - 6:00 pm	55

Oak Ridge Preschool  
 4501 Martin Luther King Blvd  
 Sacramento, CA 95820

Chong Vang, Site Supervisor  
 (916)395-4667

License Type	License #	Hours of Operation	Capacity
Day Care Center	340317930	8:00 am - 11:00 am	24

Pacific Preschool  
 6201 41st Street  
 Sacramento, CA 95824-

Amy Ronsheimer, Site Supervisor  
 (916)395-4672

License Type	License #	Hours of Operation	Capacity
Day Care Center	340310524	8:00 am - 11:00 am	24

Parkway Preschool  
 4720 Forest Parkway  
 Sacramento, CA 95823-

Sonja Fulgham, Site Supervisor  
 (916)395-4677

License Type	License #	Hours of Operation	Capacity
Day Care Center	340321756	8:00 am - 2:30 pm	48

# EED Contractor Data Sheet

**Site**

Peter Burnett Preschool  
 6032 36th Ave, Room 3  
 Sacramento, CA 95824

Gulalai Shetab, Site Supervisor  
 (916)395-4683

License Type	License #	Hours of Operation	Capacity
Day Care Center	340321380	8:00 am - 11:00 am	24

Skills Children's Center  
 5451 Lemon Hill Ave  
 Sacramento, CA 95824

Theresa Perez, Site Supervisor  
 (916)395-5585

License Type	License #	Hours of Operation	Capacity
Day Care Center	343606949	8:00 am - 11:00 am	24

Susan B Anthony Preschool  
 7864 Detroit  
 Sacramento, CA 95832

Toribia Gallegos, Site Supervisor  
 (916)395-4712

License Type	License #	Hours of Operation	Capacity
Day Care Center	340317932	8:00 am - 2:30 pm	47

Washington Children's Center  
 530 18th Street  
 Sacramento, CA 95811

Willie Anderson, Site Supervisor  
 (916)264-4186

License Type	License #	Hours of Operation	Capacity
Day Care Center	340306403	8:30 am - 11:30 am	24

Woodbine Children's Center  
 2500 52nd Avenue  
 Sacramento, CA 95822

Jill Hernandez, Site Supervisor  
 (916)395-4916

License Type	License #	Hours of Operation	Capacity
Day Care Center	343605503	8:00 am - 11:00 am	24



# EED Contractor Data Sheet

## Number of Children Served in Sites, Offices, or Licensed Family Child Care Homes

The number of children served displayed in the various sections below is based on information that is updated annual by contractor staff as part of the Continued Funding Application process. The numbers represent enrollment on a specific date that was identified in the Continued Funding Application. The numbers do not represent actual services throughout the year.

**Site**

**Number of children served by age group**

Abraham Lincoln Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	6	18	0

**Number of children served by age group**

Bear Flag Children's Center

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	10	14	0

**Number of children served by age group**

Bowling Green Chacon Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	5	19	0

**Number of children served by age group**

Bowling Green McCoy Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	5	19	0

**Number of children served by age group**

Camellia Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	8	16	0

**Number of children served by age group**

Earl Warren Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	11	13	0

**Number of children served by age group**

Edward Kemble Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	10	14	0

# EED Contractor Data Sheet

**Site**

**Number of children served by age group**

Elder Creek Children's Center

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	14	4	0

**Number of children served by age group**

Ethel I. Baker

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	8	12	0

**Number of children served by age group**

Ethel Phillips Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	7	13	0

**Number of children served by age group**

Fr. Keith B. Kenny Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	11	12	0

**Number of children served by age group**

Golden Empire Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	10	14	0

**Number of children served by age group**

H.W. Harkness Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	11	12	0

**Number of children served by age group**

Hiram Johnson Center

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	17	18	0

**Number of children served by age group**

James Marshall State Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	10	14	0

# EED Contractor Data Sheet

**Site**

**Number of children served by age group**

John Bidwell Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	21	12	0

**Number of children served by age group**

John Cabrillo Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	7	16	0

**Number of children served by age group**

John Sloat Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	10	9	0

**Number of children served by age group**

John Still Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	6	17	0

**Number of children served by age group**

Leatata Floyd Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	8	11	0

**Number of children served by age group**

Lisbon Early Learning Center

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	5	17	0

**Number of children served by age group**

Martin Luther King Jr. PS

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CCTR3220	0	0	0	17	0	0	0
CSPP3406	0	0	0	0	12	10	0

**Number of children served by age group**

Oak Ridge Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	9	11	0

# EED Contractor Data Sheet

**Site**

**Number of children served by age group**

Pacific Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	11	13	0

**Number of children served by age group**

Parkway Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	9	8	0

**Number of children served by age group**

Peter Burnett Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	7	14	0

**Number of children served by age group**

Skills Children's Center

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	10	13	0

**Number of children served by age group**

Susan B Anthony Preschool

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	8	13	0

**Number of children served by age group**

Washington Children's Center

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	7	13	0

**Number of children served by age group**

Woodbine Children's Center



Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP3406	0	0	0	0	11	13	0

## EED Contractor Data Sheet

### Total Children Served by Contract


Contract	Infants	Toddlers	Pre School	School Age	CSPP only		
					3 yrs	4yrs	Other
CCTR3220	0	0	0	17	0	0	0
CSPP3406	0	0	0	0	284	402	0

# Sacramento City Unified

County	Sacramento
District	Sacramento City Unified <a href="#">List of active district's schools</a>
CDS Code	34 67439 0000000
District Address	5735 47th Ave. Sacramento, CA 95824-4528 <a href="#">Google Map</a> 
Mailing Address	PO Box 246870 Sacramento, CA 95824-6870
Phone Number	(916) 643-9000
Fax Number	(916) 399-2058
Email	<a href="mailto:superintendent@scusd.edu">superintendent@scusd.edu</a>
Web Address	<a href="http://www.scusd.edu">www.scusd.edu</a> 
Superintendent	Lisa Allen Interim Superintendent <a href="mailto:superintendent@scusd.edu">superintendent@scusd.edu</a>
Chief Business Official	Janea Marking Chief Business Officer (916) 643-9055 <a href="mailto:janea-marking@scusd.edu">janea-marking@scusd.edu</a>
Status	Active
District Type	Unified School District
Low Grade	P
High Grade	Adult
NCES/Federal District ID	0633840
CDS Coordinator (Contact for Data Updates)	Suzanne McKelvey (916) 643-9280 <a href="#">Request Data Update(s)</a>
Last Updated	August 7, 2023

## Directory Disclaimer

The California School Directory and related public school and district data files (collectively referred to as the "Directory"), contain information about California schools, districts, and school/district administrators that is voluntarily self-reported by local education agencies (LEAs) to the California Department of Education (CDE) as a public convenience. Because the information is voluntarily self-reported, the Directory does not contain information for every LEA and the information that is in the Directory may be outdated or have errors, omissions, typos and other inaccuracies. Therefore, information, or the absence of information, in the Directory should not be relied upon for any purpose and should be used only to contact the LEA. The CDE makes no representation or warranty, express or implied, with respect to Directory information.

For information regarding LEA accreditation, please visit the US Department of Education's [Accreditation and Quality Assurance](#)  web page.

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**RESOLUTION AUTHORIZING CONTINUED FUNDING APPLICATION**

This resolution is adopted to certify approval of the Governing Board to submit the Continued Funding Application (CFA) to the California Department of Education (CDE). If the CFA is approved by the CDE, the agency's current California State Preschool Program contract and Prekindergarten and Family Literacy Support contract, if applicable, will be automatically renewed for fiscal year (FY) 2024–2025. This resolution further authorizes the designated representative(s) below to sign the CFA and all related FY 2024–2025 contract documents.

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RESOLUTION

BE IT RESOLVED that the Governing Board of  
Sacramento City Unified School District

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authorizes that the person/s listed below, is/are authorized to sign the FY 2024–2025 CFA and all related contract documents for the Governing Board.

NAME/S OF AUTHORIZED REPRESENTATIVE/S	TITLE/S

PASSED AND ADOPTED THIS \_\_\_\_\_ day of \_\_\_\_\_ (month year), by the Governing Board of \_\_\_\_\_ of \_\_\_\_\_ County, in the State of California.

I, \_\_\_\_\_, Clerk of the Governing Board of \_\_\_\_\_, of \_\_\_\_\_ County, in the State of California, certify that the foregoing is a full, true and correct copy of a resolution adopted by the said Board at a meeting thereof held at a regular public place of meeting and the resolution is on file in the office of said Board.

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(Clerk's Signature)

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(Date)