

**ORDINANCE/RESOLUTION REQUEST**

Please email requests to the Mayor's Legislative Team  
at [MileHighOrdinance@DenverGov.org](mailto:MileHighOrdinance@DenverGov.org) by **3:00pm on Monday**.

**Date of Request:** February 16, 2012

Please mark one:      **Bill Request**           or      **Resolution Request**

**1. Has your agency submitted this request in the last 12 months?**

**Yes**            **No**

**If yes, please explain:**

**2. Title:**

Revenue from the Colorado Department of Education in the amount of \$30,000 for the "Expelled and At-Risk Students" (EARSS) program which will exceed the \$500K threshold.  
Revenue Contract: GC91053(03)

**3. Requesting Agency:**

Denver Department of Human Services

**4. Contact Person:**

- **Name:** Ron Mitchell
- **Phone:** 720-944-2903
- **Email:** Ron.Mitchell@denvergov.org

**5. Contact Person:**

- **Name:** Ron Mitchell
- **Phone:** 720-944-2903
- **Email:** Ron.Mitchell@denvergov.org

**6. General description of proposed ordinance including contract scope of work if applicable:**

This Ordinance will authorize the acceptance of additional funding received from the Colorado Department of Education (CDE) for the Expelled and At-Risk Students (EARSS) program in the amount of \$30,000. CDE has funded this program for the last three years at the Family Crisis Center. With the additional \$30,000 received for this program, the total value of this contract will exceed the \$500,000 Ordinance threshold (for a total amount of funding of \$511,148). The program is an annual program with renewal up to five years.

- a. Contract Control Number:** GC91053 (03)
- b. Duration:** July 1, 2011 through June 30, 2012
- c. Location:** Denver Human Services
- d. Affected Council District:** Citywide
- e. Benefits:** The EARSS program is a program that supports students who have been expelled and provides educational services to prevent future suspensions and expulsions.
- f. Costs:** Match Amount Required? No.

**7. Is there any controversy surrounding this ordinance? Please explain. No**

---

*To be completed by Mayor's Legislative Team:*

SIRE Tracking Number: \_\_\_\_\_

Date Entered: \_\_\_\_\_