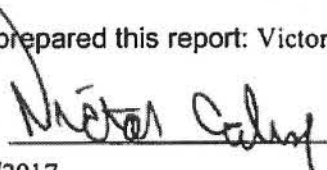


**FORM A**

**New York State Consultant Services  
Contractor's Planned Employment**  
From Contract Start Date Through the End of the Contract Term

State Agency Name: NYS Education Department	Agency Business Unit: SED01
State Agency Department ID: 3300200	Contract Number: C012873
Contractor Name: NYC: At Work	Contract End Date: 02/28/2020
Contract Start Date: 03/01/2017	

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
11-9151.00	2.00	30,240.00	553,083.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
<b>Total this Page</b>	<b>2.00</b>	<b>30,240.00</b>	<b>\$553,083.00</b>
<b>Grand Total</b>	<b>2.00</b>	<b>30,240.00</b>	<b>553,083.00</b>

Name of person who prepared this report: Victor Calise  
 Title: Commissioner  
 Preparer's Signature:   
 Date Prepared: 06/21/2017  
 Phone #: 212.788.2835