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 Dept of Education

State Agency Department ID:

Agency Business Unit:

Contractor Name: Syracuse University

Contract Number:

Contract Start Date: 07/01/2024

Contract End Date: 06/30/2029

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
11-1021.00 General and Operations Manager	2.00	20,800.00	\$873,352.00
13-1151.00 Training and Development Specialist	3.00	20,800.00	\$695,496.00
43-6014.00 Secretaries and Administrative Assistants, Except Legal, Medical, and Executive	1.25	13,000.00	\$286,534.00
27-3091.00 Interpreters and Translators	10.00	225.00	\$20,000.00
13-1121.00 Meeting, Convention, and Event Planners	5.00	200.00	\$20,000.00
	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
Total this Page	21.25	55,025.00	\$1,895,382.00
Grand Total	21.25	55,025.00	\$1,895,382

Name of person who prepared this report: Maria Gill

Title: Family Engagement Facilitator, Syracuse University

Preparer's Signature: _

Date Prepared: 2129 24

Phone #: 315-443-4352