# Z:\Quality Assurance Monitoring\Reports\23 CareerSource South Florida_Full Color.jpg

Attachment F

Cover Sheet

Workforce Services

**TECHNICAL PROPOSAL**

**Release Date: March 24, 2020**

1. Identifying Data:

 **Place a ten-digit alpha-numeric code in the space provided:**

|  |
| --- |
|  |

#### Summary:

|  |  |  |
| --- | --- | --- |
| Proposed Services/Programs | Funds Requested | Cost per Participant |
|  |  |  |  |  |
| **Workforce Services** |  |  |  |  |
| Totals |  |  |  |

#### Specify below the location(s) where the services will be delivered:

|  |
| --- |
| Proposed Location(s) |
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