



**Building the Healthcare Workforce  
Grant Proposal Signature Page**

**Funding Round 1:** RFP release date 02/05/25

**Application Type:** (select one)

- Track One – Coalition Planning Grant
- Track Two – Initiative Grant

By submitting this application for CMSP’s Building the Healthcare Workforce Grant Program, the applicant signifies acceptance of the applicant’s responsibility to comply with all requirements stated in the Request for Proposals (RFP) authorized by the County Medical Services Program Governing Board (Governing Board). Further, the applicant understands that should the Governing Board award grant funding to the applicant, the Governing Board is not obligated to fund the grant until the applicant submits the correct and complete documents as required for the grant agreement; the Governing Board is otherwise satisfied that the applicant has fully met all Governing Board requirements for receipt of grant funding; and the grant agreement between the Governing Board and the applicant has been fully executed. The Governing Board shall have sole discretion on whether or not to award grant funding of any amount of the applicant.

I declare that I am the authorized representative of the applicant described herein. I further declare under penalty of perjury under the laws of the State of California that the information set forth in this Cover Sheet and the attached response to the Building the Healthcare Workforce Grant RFP is true and correct.

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Applicant Organization

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Authorized Signature

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Date

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Name

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Title