



## Legislation Text

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**File #:** 22-4605, **Version:** 1

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**Department:** Texas A&M AgriLife Extension  
**Department Head/Elected Official:** David D. Wright

**Regular or Supplemental RCA:** Regular RCA  
**Type of Request:** Grant

**Project ID** (if applicable): N/A  
**Vendor/Entity Legal Name** (if applicable): Texas A&M AgriLife Extension Service

**MWDBE Contracted Goal** (if applicable): N/A  
**MWDBE Current Participation** (if applicable): N/A  
**Justification for 0% MWDBE Participation Goal:** N/A - Goal not applicable to request

**Request Summary (Agenda Caption):**

Request by Texas A&M AgriLife Extension for approval to accept an amendment to an agreement with Texas A&M University to extend the end date to August 26, 2022 for the Children, Youth & Families at Risk (CYFAR) Program.

**Background and Discussion:**

The extension through the grant period end date would allow for funds to be used for intended position.

**Expected Impact:**

Department's ability to utilize funds that were awarded.

**Alternative Options:**

Court could choose not to extend the end date which would result in funds not being utilized by department

**Alignment with Goal(s):**

- Justice and Safety
- Economic Opportunity
- Housing
- Public Health
- Transportation
- Flooding
- Environment

\_ Governance and Customer Service

**Prior Court Action** (if any):

Date	Agenda Item #	Action Taken
08/10/2021	259	Approved

**Location:**

Address (if applicable):

Precinct(s): Choose an item.

<b>Fiscal and Personnel Summary</b>			
Service Name	CFAR		
	<b>SFY 22</b>	<b>FY 23</b>	<b>Next 3 FYs</b>
<b>Incremental Expenditures (do NOT write values in thousands or millions)</b>			
Labor Expenditures	\$	\$	\$
Non-Labor Expenditures	\$	\$	\$
<b>Total Incremental Expenditures</b>	\$	\$	\$
<b>Funding Sources (do NOT write values in thousands or millions)</b>			
Existing Budget			
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
<b>Total Current Budget</b>	\$	\$	\$
Additional Budget Requested			
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
<b>Total Additional Budget Requested</b>	\$	\$	\$
<b>Total Funding Sources</b>	\$	\$	\$
<b>Personnel</b> (Fill out section only if requesting new PCNs)			
Current Position Count for Service	-	-	-
Additional Positions Requested	-	-	-
<b>Total Personnel</b>	-	-	-

**Anticipated Court Date: 08/02/2022**

**Anticipated Implementation Date (if different from Court date):**

**Emergency/Disaster Recovery Note:** Not an emergency, disaster, or COVID-19 related item

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**Contact(s) name, title, department:** Diana Groce, Business Manager, 821

**Attachments** (if applicable): Conveyance, Court Order, Approval to extend date