## SUBCONTRACTOR PROFILE

##### (COMPLETE FOR EACH SUBCONTRACTOR -Use additional pages as needed)

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| --- |
| Legal Name of Agency: |
| FEIN :  |
| Agency Contact Person: |
| Title: |
| Address: |
| Phone: | Fax: |
| Email: |
| Amount of Subcontract: |

##### Brief description the subcontractor agency

##### Description of services to be provided related to the service/program

Justification of the use of subcontractor to meet program goals and outcomes